

\*If you are a faculty member filling out this form, please sign here:

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## JOB REPORT FORM

**Please report full-time or part-time employment related to your occupational program. All information reported will remain *confidential*.**

Name \_\_\_\_\_ ID# \_\_\_\_\_

RCC Occupational Program \_\_\_\_\_

**Please check one of the following three choices:**

\_\_\_\_\_ 1) I work in a job related to my occupational program at RCC.

\_\_\_\_\_ 2) I am working, but in an unrelated field.

\_\_\_\_\_ 3) I am not working.

**Please fill in the following if you checked #1 or #2.**

Employer \_\_\_\_\_

Job Title \_\_\_\_\_

Salary \_\_\_\_\_ Start date \_\_\_\_\_

Did you start this job?

\_\_\_\_\_ Before entering your occupational program.

\_\_\_\_\_ While enrolled in your occupational program.

\_\_\_\_\_ After graduating.

Student Signature \_\_\_\_\_

**Please return this form to: Career Services Center N - 129**