



PLEASE BE SURE TO SAVE THIS FORM ONTO YOUR COMPUTER
THEN ATTACH IT TO THE EMAIL

First Name _____ Last Name; _____

Current Email Address _____

Phone _____

Preferred method of contact; Email _____ Phone _____

Program currently enrolled _____ Anticipated Graduation Date _____

What days and times are you available for an appointment?

Have you registered with the Career Services Office? Y _____ N _____

Have you completed a career assessment? Y _____ N _____

Reason for Scheduling a Career Services appointment

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SEND YOUR COMPLETED FORM TO pamela.little@drakestate.edu OR CLICK ON THE SCHEDULE
APPOINTMENT BUTTON AND ATTACH THERE.

Schedule Appointment