CAREER SERVICES OFFICE
221 COLLEGE LANE
ROANOKE COLLEGE
SALEM, VIRGINIA 24153

CREDENTIALS FILE SERVICE INSTRUCTIONS FOR ROANOKE COLLEGE STUDENTS AND ALUMNI:

PURPOSE: A Credentials File at Roanoke College enables students and alumni to maintain their employment or graduate school application credentials in a central location, the Career Services Office. These recommendations can then be mailed to prospective employers or graduate schools at the applicant’s request. This eliminates the necessity of asking individuals to write letters of recommendation each time you apply for a position. It offers you assurance that all credentials are received quickly and in a professional manner. Students or alumni who establish a Credentials File may designate on their resumes that their letters of recommendation are available from the Career Services Office (at the above address). Requests received from employers or graduate schools for credentials, however, must be approved by the student or alumnus before they will be mailed.

ELIGIBILITY: Roanoke College undergraduates and alumni must have completed two full terms at Roanoke College to establish a Credentials File.

FILE CONTENTS: A complete Credentials File includes the items listed below. Please read the section on “Office Policies” for a complete explanation of these items.

- Registrant’s Agreement Sheet
- Up-to-date Resume emailed to Director of Career Services
- Letters of Recommendation* (three is standard minimum)
  *It is to your advantage to secure these letters from faculty members, supervisors and employers at the time that they are best acquainted with you.
- Other items, such as student teaching/internship evaluations, graduate exam score reports

TO ESTABLISH FILE: Please submit all of the items indicated on the above list to the Career Services Office. It is your responsibility to keep this file up-to-date.

OFFICE POLICIES

GENERAL GUIDELINES: These registration forms represent YOU to the employing official or graduate school. They should be neatly and accurately prepared. If forms are incomplete or not completed correctly, they will be returned to you. Once a file is established, should you move or change any contact information, please remember to notify Career Services.

REGISTRANT’S AGREEMENT SHEET: Please complete all information requested. The Registrant’s Agreement must be signed before your credentials file can be established. Your file will be purged after five (5) years. Teacher candidates, you may obtain your Praxis Scores and grades from the Registrar’s Office after this time period. Student teaching evaluations are kept on permanent file in the Education department.

RESUME: Electronic resumes will be kept on file in Career Services, and will be printed on resume paper for inclusion in your credentials file when a request is made for sending it out. Please make sure that Career Services always has your most updated resume to use. If you have more than one version, be sure to indicate which version is to be used with specific mailings.

TRANSCRIPTS: Transcripts will only be issued if all financial obligations to the College have been satisfied. The cost for each transcript is $5.00. The College now uses a secure online transmittal service to electronically send transcripts, if the intended recipient can receive them in this format. You need to check with the intended recipient(s) to make sure that they will accept electronic transcripts!! If so, visit http://roanoke.edu/A-Z_Index/Registrar/Forms/Order_Transcript.htm for details, to set up your account, and to order your transcript(s) directly through this service. Traditional paper transcripts can still be sent if this is preferred by the prospective recipient(s). If you wish to have a paper transcript sent WITH your credentials file, work through Career Services to include this with your credentials file to be mailed.
LETTERS OF RECOMMENDATION: Complete the top portion of the Roanoke College Recommendation Form. Be sure that you mark either the confidential or the non-confidential waiver box on each recommendation form. Also sign and date the form before you give it to the reference writer. As a matter of courtesy, you should also provide the writer a stamped, addressed envelope in which to mail the letter to Career Services (not necessary for on-campus personnel who can use campus mail). Four recommendation forms are included with this packet. If you need more, you may copy the blank form as needed; however, more than four letters tends to be seen as “overkill” to some. After five (5) years your file will be purged. The recommendations will be destroyed.

When asking for a recommendation from an individual, be sure that a sound relationship exists between you and the individual so a positive recommendation will be given. If you are unsure that one does exist, sit down with the potential recommender and candidly discuss the writing of such a letter of recommendation. You can help the person writing your recommendation by providing him/her with a copy of your resume. If you feel you should use a particular individual as a reference, but you doubt the type of letter he/she might provide, the director of Career Services can review such a letter and offer an opinion about its potential use. If your file is “confidential,” however, the contents or reasons for this opinion cannot be disclosed.

OPEN OR CONFIDENTIAL FILE: It is recommended that your file be confidential. In accordance with the Family Educational Rights and Privacy Act of 1974 (P.L. 93-380), effective January 1, 1975, you can reserve the right to establish a credentials file that gives you the privilege of openly inspecting letters of recommendation. Because a large number of employers have indicated strong preferences for those recommendations written in confidence, you may wish to waive your rights to review the recommendations. Your decision is inclusive of all of the letters of recommendation in your file. If you have decided on a confidential file and wish to reverse this decision, we are obligated to return the letters to the recommenders. You must contact them directly if you wish them to review the letters with you.

CREDENTIAL MAILING SERVICE: Credentials are sent directly to prospective employers or graduate school officials. Credentials are not sent to the employment agencies, relatives, unidentified post office boxes, street addresses, or “third party” participants. ALL REQUESTS FOR CREDENTIAL FILE MUST BE IN WRITING. Please include complete name, title, and address when making a request. Credential Request Forms are available in the Career Services Office. Credentials files are mailed within 48 hours of receiving a request, unless you have requested that it be held until certain items are received for inclusion.

COST OF MAILING: There will be a $2.00 charge for each credentials packet mailed from the Office of Career Services. This fee is payable when the credentials file is requested. Checks should be made payable to “Roanoke College.” Credentials packets will only be faxed, without transcripts, in the case of an emergency. The charge for a faxed credentials packet is $10.00. Again, transcripts may be sent with the credentials packet, for an additional $5 fee per transcript. Separate checks for credentials and transcript fees should be issued please.

QUESTIONS? Any questions about the Credentials File service should be addressed to the Director of Career Services or to the Coordinator for Career Services. Telephone number is 540-375-2303.
ROANOKE COLLEGE  
OFFICE OF CAREER SERVICES  
CREDENTIALS FILE AGREEMENT

Name ___________________________________________ RC ID # ____________________________

Address ___________________________________________________________________________

Graduation Date ___________________________ Student Teacher completion date _______________

Phone Number ______________________________

Type of Career Position(s) Desired (either now or after graduate school):

____________________________________________________________________________________

____________________________________________________________________________________

List the persons to whom you will be giving a Letter of Recommendation Forms:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position/Company</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Registrant's Agreement
In filing these credentials, I understand that:
1) All recommendations received prior to January 1, 1975 remain confidential.
2) I am authorizing the release of my file to prospective employers who have position vacancies for which I am qualified.
3) I must assume responsibility for seeing that my recommendations are on file.
4) I must keep my records up-to-date and report any change in plans or acceptance of a position.

Regarding the confidentiality of your credentials file, please check ONLY ONE of the following:

I have decided on a **CONFIDENTIAL FILE**, meaning that the letters of recommendation contained therein are NOT subject to my review. Furthermore, I am **waiving my right** under public law 93-380 to view my letters of recommendation; I have indicated on the blank Letter of Recommendation forms that the letters will be kept in confidence from me. In sending my file to prospective employers and/or graduate schools, I understand that the Office of Career Services will emphasize that it is a confidential file and that I have not had access to it.

OR

I have decided on a **NON-CONFIDENTIAL FILE** which is open to my inspection. I understand that I may view the file at my discretion by the Office of Career Services will maintain it in confidence from the general public. Furthermore, I have indicated on the blank Letter of Recommendation form that the letters will be open to my review.

Registrant ___________________________ Date of Filing Credentials ___________________________

(Signature Required - do not print or type)

The Office of Career Services reserves the right to terminate all service to any registrant who willfully fails to abide by an agreement with employing officials, or who engages in other unethical practices.
CREDENTIALS REQUEST
CAREER SERVICES OFFICE
ROANOKE COLLEGE

Please complete one request for each addressee. The cost for each credential packet mailed is $2.00 ($10.00 if faxed). Make check payable to "Roanoke College."

Send to: ________________________________________________

Address: ________________________________________________

City __________________________ State _______ Zip ______

Transcripts will only be issued if all financial obligations to the College have been satisfied. The cost for each transcript is $5.00. The College now uses a secure online transmittal service to electronically send transcripts, if the intended recipient can receive them in this format. You need to check with the intended recipient(s) to make sure that they will accept electronic transcripts!! If so, visit http://roanoke.edu/A-Z_Index/Registrar/Forms/Order_Transcript.htm for details, to set up your account, and to order your transcript(s) directly through this service. Traditional paper transcripts can still be sent if this is preferred by the prospective recipient(s). If you wish to have a paper transcript sent WITH your credentials file, complete the information below, and please include a separate check ($5 for each transcript needed), made payable to "Roanoke College." Be sure to sign on the line provided, or we will have to return this request to you, causing a delay in the processing of your request!!

Send with Paper Transcripts: Yes [ ] (Signature required, just below) No [ ]

I hereby authorize Roanoke College to release my paper academic transcript to the name and address above.

Requestor's Signature ______________________________________ Date ______

If currently enrolled, do you want this request held until the end of the term? [ ] Yes [ ] No

Number of copies to be sent: ______ Purpose for Requesting Transcript: (check more than one if appropriate)

[ ] Considering Transfer [ ] Summer School Enrollment
[ ] Employment [ ] Graduate or Professional School
[ ] Grants and Scholarships [ ] Other:
[ ] Study Abroad

Requestor's Name: ______________________________________

Mailing Address: ______________________________________

Telephone Number: __________________ Email Address: __________________

Semester and year that you last attended the College: ______ Sem. ______ Year ______

Social Security No. (last four digits) ____________ RCID # ____________

***************************************************************************

For Office Use:

Date Request Received __________________ Date Payment Received __________________

Date Credentials Mailed or Delivered to Office of the Registrar __________________
ROANOKE COLLEGE
Office of Career Services

LETTER OF RECOMMENDATION FORM

Candidate’s Full Name

In accordance with the Family Educational Rights and Privacy Act of 1974:
_____ I am establishing a CONFIDENTIAL file and am requesting that this recommendation be held in confidence by officials of Roanoke College and hereby waive any rights I may have to examine it.
_____ I am establishing a NON-CONFIDENTIAL file and reserve the right to review this letter of recommendation.
I hereby give permission to the writer of this letter to provide any information he or she deems relevant regarding my application.

Candidate’s Signature __________________________ Date __________________________

To the Reference Person: This is one of several letters in the credentials file for the above named student/graduate. Please comment on his/her academic and/or work experience, personal qualities and interests, character, skills, and abilities. Please type or print your comments in the space below, or indicate that they are attached on separate paper. In either case, please also complete the information at the bottom of this form. Your immediate attention to this letter is greatly appreciated.

Signature __________________________

Type/Print Name __________________________

Date __________________________

Position __________________________

Employer __________________________

Address __________________________

Please return to: Roanoke College
Office of Career Services
Salem, VA 24153
ROANOKE COLLEGE
Office of Career Services

LETTER OF RECOMMENDATION FORM

Candidate’s Full Name

In accordance with the Family Educational Rights and Privacy Act of 1974:

☐ I am establishing a CONFIDENTIAL file and am requesting that this recommendation be held in confidence by officials of Roanoke College and hereby waive any rights I may have to examine it.

☐ I am establishing a NON-CONFIDENTIAL file and reserve the right to review this letter of recommendation.

I hereby give permission to the writer of this letter to provide any information he or she deems relevant regarding my application.

Candidate’s Signature ___________________________ Date ____________

To the Reference Person: This is one of several letters in the credentials file for the above named student/graduate. Please comment on his/her academic and/or work experience, personal qualities and interests, character, skills, and abilities. Please type or print your comments in the space below, or indicate that they are attached on separate paper. In either case, please also complete the information at the bottom of this form. Your immediate attention to this letter is greatly appreciated.

Signature _______________________________________

Type/Print Name ________________________________

Date ____________________

Position _______________________________________

Employer ________________________________

Address: ______________________________________

Please return to: Roanoke College
Office of Career Services
Salem, VA 24153
Candidate’s Full Name

In accordance with the Family Educational Rights and Privacy Act of 1974:

_____ I am establishing a CONFIDENTIAL file and am requesting that this recommendation be held in confidence by officials of Roanoke College and hereby waive any rights I may have to examine it.

_____ I am establishing a NON-CONFIDENTIAL file and reserve the right to review this letter of recommendation.

I hereby give permission to the writer of this letter to provide any information he or she deems relevant regarding my application.

<table>
<thead>
<tr>
<th>Candidate’s Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

To the Reference Person: This is one of several letters in the credentials file for the above named student/graduate. Please comment on his/her academic and/or work experience, personal qualities and interests, character, skills, and abilities. Please type or print your comments in the space below, or indicate that they are attached on separate paper. In either case, please also complete the information at the bottom of this form. Your immediate attention to this letter is greatly appreciated.

Signature

Type/Print Name

Date

Position

Employer

Address:

Please return to: Roanoke College
Office of Career Services
Salem, VA 24153
ROANOKE COLLEGE
Office of Career Services

LETTER OF RECOMMENDATION FORM

Candidate’s Full Name ____________________________________________

In accordance with the Family Educational Rights and Privacy Act of 1974:

______ I am establishing a CONFIDENTIAL file and am requesting that this recommendation be held in confidence by officials of Roanoke College and hereby waive any rights I may have to examine it.

______ I am establishing a NON-CONFIDENTIAL file and reserve the right to review this letter of recommendation.

I hereby give permission to the writer of this letter to provide any information he or she deems relevant regarding my application.

_________________________  ____________________________
Candidate’s Signature  Date

To the Reference Person: This is one of several letters in the credentials file for the above named student/graduate. Please comment on his/her academic and/or work experience, personal qualities and interests, character, skills, and abilities. Please type or print your comments in the space below, or indicate that they are attached on separate paper. In either case, please also complete the information at the bottom of this form. Your immediate attention to this letter is greatly appreciated.

Signature _________________________________________________

Type/Print Name ____________________________________________

Date ______________________________________________________

Position __________________________________________________

Employer __________________________________________________

Address: _________________________________________________

Please return to:  Roanoke College
                   Office of Career Services
                   Salem, VA 24153