CAREER CENTER
Student Referral/Assignment Form
Oceanside Campus, Bldg 3700, M-F
San Elijo Campus, Admin Bldg., M/W, 9-noon
www.miracosta.edu/careers
760.795.6772

Student Name: ___________________________ Student ID: ________________

Referred by: Name: ___________________________ Extension: ________________
Department/Discipline: __________________________________________________

Suggested Service (please check all that apply):

____ Career Assessment/Counseling (by appointment)
____ Career Exploration/Research (Majors, Occupations, Industry Trends)
____ Employment Search

____ Experiential Education: ______ Co-op Work Experience Education (299 courses)
____ Internship Studies (292 courses)

____ Career Development Workshop: _____ Resume writing
____ Interviewing
____ Choosing a Major
____ Social/ Professional Networking

____ Other (please describe under “additional comments” below.)

Additional Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

_____ Please check here if you want a staff member from The Center for Career Studies & Services to
verify that the student referred received the service requested.

________________________________________  ________________
Career Center Staff Signature       Date