

Who Are You

First Name: _____
Last Name: _____
Name at Graduation: _____

Contact Information

Email: _____
Cell or Home Phone: _____

While You Were Here

Major: _____
Year of Graduation: _____

Employment

First Employment Out of School: _____
Current Employer: _____
Current Job Title: _____
Current Responsibilities: _____

Tell us, briefly, why you "Love Your Job":

Media Release Form

I grant permission to South Hills School of Business & Technology the rights to use my:

- Contest submission, quotes, testimonial statements, scholarship announcement, or success story
- Photo image, likeness and/or sound of my voice as recorded on audio or video
- I understand that the above may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness appears. I also understand that this material may be used in print materials, television, radio, online (including websites and social media).
- By signing this form, I acknowledge that I have completely read and fully understand the above release and agree to the utilization of this material for the "I Love My Job" contest and other educational or promotional purposes. There is no time limit on the validity of this release and I authorize the use of these items without payment or any other compensation.

Signature: _____ Date: _____