



ROWAN-VIRTUA
 Graduate School
 of Biomedical Sciences

Alumni Registration – Recent Graduate

Name: _____ Rowan ID#: _____

Graduation Semester/Year: _____ Degree Earned: _____

Permanent Address: _____

Phone number: _____ Permanent Email: _____

Career Outcome: Found a Position Searching for a Position
 Attending Additional Schooling Searching for Additional Schooling
 Other, explain: _____

Are you an international student? Yes No If yes, are you on OPT? Yes No

If you have found a position/been accepted to another school please complete the following:

Name of Employer/School: _____ Start Date: _____

Brief description of work or post-GSBS education:

Employer/School Location (city, state): _____

Would you be interested in writing a brief testimonial about your education and experience at RowanGSBS? Yes No

May we share your success with current or prospective students including your name, program, graduation date and employer/school? Yes No

Signature: _____ Date: _____

By completing this form, you are certifying that this information is true and accurate to the best of your knowledge and understand if you wish to revoke the above authorization, you must do so in writing to RowanGSBS. You will be added to the GSBS Alumni email list and will be kept up-to date with exciting GSBS news! You may opt out at any time. We will also remind you to update this form on an annual or biannual basis. Please notify of us changes in your employment, changes to contact information and especially your successes! *From all of us at GSBS-Congratulations!*

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