

CAREER SUCCESS CENTER COOPERATIVE EDUCATION INTERNSHIP APPLICATION AND RECORD

Suite 300 Westside Campus Center phone: (203) 837-8263 fax: (203) 837-8540 ciarleglioa@wcsu.edu www.wcsu.edu/careersuccess/students/coop.asp For office use only

Applicants: Please complete sections B, C, D, and E. Section A to be completed by CSC staff during your appointment.

SECTION A

Coordinator's initials		Today's c	late		
Semester available		PT	FT	6-Month	
Preferred number of hours week	ly	Geographic pr	eference		
Transportation? Yes No_	Willing	g to commute?	Yes	How far?	No
Areas of interest			2nd choi	ce	
3rd choice			Other		
Resume: draft? r	reviewed?		Signed up	for workshop on	
Comments					
Update					
SECTION B					
Name			Stu	dent ID number	
Address (if living on-campus or o	different than p	ermanent addre	ess)		
City				Phone	
Permanent address					
City					
Email address					
U.S. Citizen: Yes No	If r	no, visa type an	d number_		
Are you legally permitted to worl	k in the USA?	Yes	No		
EDUCATIONAL INFORMATION	I				
Major	Concentration	۱		_ Minor	
Credits currently completed	Over	rall GPA	Expe	cted graduation date	
Faculty Advisor					
Name courses completed in ma	jor/concentration	on			
Other colleges attended/courses	s taken or degr	ee(s) received_			

EMPLOYMENT AND/OR EXPERIENCE:

Please list any permanent, cooperative, intern, voluntary, summer, civic, community or military, most

recent experience first: NAME AND CITY OF EMPLOYER

NATURE OF WORK

EMPLOYMENT DATES

SECTION D

3.	I understand that attainment of a co-op internship position requires	Yes	No
	registration for credit at WCSU and payment of all applicable fees.		
4.	I understand that a passing grade for CED 297 will also involve attending	all Yes	No
	required seminars, maintaining a journal, completing a final paper and submitting evaluations on the due date.		
5.	I agree that my resume may be shown, or electronically submitted by the	y Yes	No
	CSC, to prospective co-op internship employers.		
6.	I realize that selection for a co-op internship job is at the discretion of the		No
	employer and that this application does not guarantee selection for a co- internship.	ομ	
Sig	nature Date		
SE	CTION E		

The Cooperative Education Internship Program at Western Connecticut State University is open to any student regardless of sex, age, race, religion or national origin. Applicants are requested to fill out the following section to assist the Co-op Internship Office in collecting affirmative action data. This file is not open to review by any outside source and none of this information will be used in any way to prevent a student from participating in the program or being placed with a Co-op Internship employer.

Sex:	Male	Female	Check one:	Native American
Birthdate				Asian/Pacific islander
				Black/Not of Hispanic Origin
				White/Not of Hispanic Origin
				Hispanic

IF YOU NEED ACCOMMODATION BECAUSE OF DISABILITY, INITIALLY DISCUSS THIS WITH THE CSC STAFF AND CHECK HERE:____