

GRADUATE COOPERATIVE EDUCATION APPLICATION

Name: _____ Campus ID: _____

Birth date: _____ SIT Box #: _____ Stevens E-mail: _____

Local Address: _____

Home Phone: _____

Cell Phone: _____

Classes Completed:	Classes in Progress:

Faculty Advisor: Name _____ Date: _____ has recommended my participation in the Graduate Co-op program. (To be signed by your Faculty Advisor)

- I have provided a copy of my signed study plan.
- I have provided a copy of my current resume.
- If F1 international student, I have provided a completed CPT form signed from the International Student Services Director. You may not delay your graduation date due to participation in co-op
- I have provided the original offer letter, less than 30 days old
- If required by Stevens, I have passed the English Competency Exam
- I will be enrolled in Graduate Co-op D -701 by the Co-op Office. I will be charged a course fee (\$350 - current) per co-op semester.

Most co-op jobs are in the metropolitan area, however, we also have jobs which require relocation to other states. Check the work locations you will accept:

- Near SIT
- Willing to relocate

Most co-op work sites are not easily accessible by public transportation, therefore, having a driver's license and being willing to get a car are **IMPORTANT** to the placement process.

Do you now have a valid US driver's license? yes no

Do you currently have a car? yes no

If no, will you get a car for co-op work terms? yes no

GRADUATE CO-OP AGREEMENT

Certain rules and regulations are necessary to effectively operate a successful co-op program. Your behavior affects not only yourself, other co-op students, the co-op staff, Stevens' reputation, and our co-op employers. As a Stevens co-op student, you are required to understand and accept the program requirements listed below:

- I understand that cooperative education is an academic program focused on learning in the workplace.**
- I understand that my duration of work will be determined and fixed at the time of my placement.**
- I will complete my assignment in the dates agreed to by the employer, the co-op staff, and myself.**
- I agree to attend all preparation meetings required by the co-op staff.**
- I agree to enroll in D 701 but not to exceed two additional classes during my co-op work term.**
- I understand that the co-op "norm" is to work full-time, with a minimum of 35 hours per week, for a semester at a time.**
- I understand to qualify for co-op, I need to complete 9 months of consecutive academic progress towards my graduate degree requirements with a minimum 3.5 GPA.**
- I agree to inform my advisor and the co-op staff member if I fall below the minimum qualifications of the program.**
- I agree to vacate my co-op job at the end of the agreed to work term.**
- To pass my co-op assignment I agree to submit a Learning Agreement, Snap Shot Evaluation, and Final Evaluation.**
- I agree to be dependable, punctual, and to notify my supervisor and the co-op staff if I have attendance issues.**
- I agree to conduct myself in an ethical manner in accordance with the principles set forth in the Co-op Preparation Meetings.**
- I agree to contact the co-op staff if I have a question concerning the policies that govern the Co-op Program or have a work related problem that I am unable to resolve.**

Please note: The policies and procedures of the Co-op Program are posted on the Co-op Web Site, www.stevens.edu/co-op.

If you have read, understand, and accept the requirements of the graduate co-op program please sign below.

Name: _____ Date: _____

Occasionally students are requested to provide a copy of their transcript to their future co-op employer. You will be contacted by the Co-op Staff about a transcript request. You have the right to agree or disagree to the release to of your transcript.

FOR GRADUATE CO-OP STUDENTS ON F1 VISAS:

F1 Co-op graduate students are permitted to work up to 11 months of "full time curricular practical training".

- Co-op students on an F1 Visa agree to pick up "work authorization" letters from the Co-op office prior to each work term.**

Name: _____ Date: _____