

To be eligible to participate in Cleveland State University's Fenn College of Engineering Cooperative Education program, students must complete the Fenn College of Engineering Cooperative Education Application and submit it to:
Engineering Career Coordinator, Stilwell Hall 104 * Cleveland, Ohio 44115
Fax: 216.687.9280 *

LAST NAME: **FIRST NAME:**
(Print Clearly) (Print Clearly)

CSU ID #:

PRIMARY PHONE: () **ALT. PHONE:** ()

EMAIL ADDRESS:
(Print Clearly)

STREET ADDRESS: **CITY:**

STATE/PROVINCE: **ZIP/POSTAL CODE:**

Are you a U.S Citizen or permanent resident?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are you a FULL-TIME CSU student majoring in ENGINEERING (or pre-engineering)?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Did you transfer to CSU from another college/university?	<input type="text"/>	<input type="text"/>	<input type="text"/>
If so, which college/university?	<input type="text"/>		
Are you currently employed in a job related to Engineering?	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you are currently employed in a job related to Engineering, 1) who is your employer & 2) what is your position title and duties?

EMPLOYER: **POSITION TITLE & DUTIES:**

CSU CLASS STATUS:
(FR, SO, JR, SR)

MAJOR DISCIPLINE:

CUMULATIVE GPA:**
(Current)

** If your cumulative GPA is lower than 2.2, you are ineligible for the Cooperative Education option; see the Engineering Co-Op Coordinator to discuss your options.
Continue to 2nd page (see back of this form)

STATEMENT OF UNDERSTANDING

1. I understand this is a 5 year program, alternating school and work, with a defined curriculum and schedule, and any change must be approved by the Dean of Engineering and the Cooperative Education Coordinator.	YES (Please Initial)
2. I understand I must maintain a 2.2 Cum. GPA to remain in the Engineering Cooperative Education Program.	YES (Please Initial)
3. If I am a transfer student, I understand I must have completed 8 cr hrs of engineering coursework at CSU to be eligible for the Fenn College of Engineering Cooperative Education Program.	YES (Please Initial)
4. I understand I must complete all required courses in compliance with the Cooperative Education guidelines established by CSU and the Fenn College of Engineering.	YES (Please Initial)
5. I have completed and passed ("S") CSC 121	YES (Please Initial)
6. I agree to update my CSU Careerline profile and resume each semester.	YES (Please Initial)
7. I understand I must be registered as a full-time student (min. 12 cr hrs) the preceding semester to the Cooperative Education experience.	YES (Please Initial)
8. I will register for the Co-op Field Experience Course, (ESC 300 or 400), for the appropriate semester, when Co-op placement has been approved and confirmed.	YES (Please Initial)
9. I will work my scheduled hours per my agreement of employment with the Cooperative Education Employment Partner.	YES (Please Initial)
10. I understand the completion of the Co-Op Learning Objective Report, Cooperative Education Evaluations and Work Reports is mandatory.	YES (Please Initial)
11. I understand some employers request Cooperative Education Program participation verification and I will be responsible for aiding this process.	YES (Please Initial)
12. If this is my first Cooperative Education experience, I agree to attend the Cooperative Education Orientation session.	YES (Please Initial)
13. I understand I must complete a minimum of 3 work periods to qualify my experience as Cooperative Education.	YES (Please Initial)
14. I understand I must submit this application and I must have the approval of the Dean of the Fenn College of Engineering and the Cooperative Education Coordinator to be eligible for the Cooperative Education Program.	YES (Please Initial)
15. I agree to communicate with my Mentor and Co-Op Coordinator minimally once per work period.	YES (Please Initial)
16. I understand the Co-Op Coordinator will assist in my search for a Cooperative Education position; however, regardless of how the position is found, I agree to communicate all Co-Op activity to the Co-Op Coordinator.	YES (Please Initial)
	YES (Please Initial)

I have read, understand and agree to comply with the terms and conditions of the Fenn College of Engineering Cooperative Education Guide:

Student Signature:	Date:
Dean, Fenn College of Engineering:	Date:
Cooperative Education Coordinator:	Date: