

UHCL Approval to Start/Continue Co-op Job (Stage 2)

Complete both pages of application form, include a copy of your employer signed Offer Letter and return to Career Services Co-op Advisor

Name: Last _____ First _____ Middle Initial _____

Address _____

Phone _____ Email _____

UHCL ID # _____ Major _____ Bachelor's _____ Master's _____

Expected Grad Date _____ UHCL GPA _____

Will you need Co-op authorization to legally work off-campus? Yes _____ No _____

Are you currently employed on-campus? Yes _____ No _____ If, yes, where? _____

Are you a T/A,I/A or R/A or have you agreed to be one in the future? Yes _____ No _____

If yes, for which professor and what semesters? _____

----- Student Enrollment Information -----

For all semesters starting with the current semester through to graduation, provide the following information:

Spring/Summer/Fall	Year	# of credit hours other than co-op	# of co-op course credits
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law), (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.

----- **Co-op Job Information** -----

Semester / Year of Co-op employment: Fall / _____ Spring / _____ Summer / _____

Start Date _____ Number of hours to be worked each week _____

Employer /Company _____

Work Location Mailing Address _____

City _____ State _____ Zip _____

Direct Supervisor Information:

Name _____ Title _____

Phone _____ Email _____

----- **Office use only** -----

Approval to start co-op job Date student was determined eligible for co-op _____

Date Sent _____ Career Services Approval _____ Date _____

Date Sent _____ Associate Dean Approval _____ Date _____

Date Sent _____ International Approval _____ Date _____

Comments: _____

Is this student a T/A for your academic unit? _____

Does student need to drop classes this semester to start work? _____

Do there appear to be any problems with the student's future progression toward a degree?

Items Included in S2 Packet S2 form _____ Copy of S1 form _____ Transcript _____ Offer Letter _____

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