

# Cooperative Education Program Student Application



Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Initial

## ACADEMIC INFORMATION

Rockhurst ID: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Year:  Freshman  Sophomore  Junior  Senior

Total Credit Hours (by end of current semester): \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_ GPA: \_\_\_\_\_

Transfer Student?  Yes  No RU Transfer Date: \_\_\_\_\_

College/University \_\_\_\_\_ Credits \_\_\_\_\_

College/University \_\_\_\_\_ Credits \_\_\_\_\_

## CONTACT INFORMATION

Present Address: \_\_\_\_\_  
Number Street (campus room & building if applicable)

City State Zip

Present Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Perm Address: \_\_\_\_\_  
Street

City State Zip

Perm Phone: \_\_\_\_\_

## TERM

Fall

Spring

Summer

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## INTERESTS

**Areas of interest** (industries, companies/organizations, or other information to describe your interests):

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**Skills you hope to develop and/or utilize:**

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**Have you already accepted a Co-op position?**       Yes       No

**If “yes,” list the company name and position title.** \_\_\_\_\_

## STATEMENT OF COMMITMENT

**In order to participate in the Cooperative Education Program at Rockhurst University, I agree to abide by the following terms and conditions:**

1. I understand I must register for the Co-op course and pay the appropriate tuition to receive academic credit for my work experience.
2. I understand I am responsible for my Co-op job search and the role of the Co-op Coordinator is to provide me with resources and career guidance to assist with my search.
3. I will respond to job offers in the time frame specified by the employer and will schedule an orientation meeting with the Cooperative Education Program Coordinator upon acceptance of an offer.
4. I will no longer pursue Co-op opportunities once I have accepted a position, either verbally or in writing. I understand renegeing acceptance may disqualify me from participating in the program.
5. I understand I must work a total of 120 hours for one credit, 240 hours to receive two credits and 360 hours to receive three credits.
6. I will maintain satisfactory job performance and will abide by my employer’s policies and procedures.
7. I will also maintain satisfactory academic performance at Rockhurst University and will complete all academic requirements of the Cooperative Education work term.
8. I understand my grade for the course will be based upon work performance and satisfactory completion of all assignments related to the Cooperative Education Program.
9. I meet the following participant requirements of the Cooperative Education Program:
  - a. I am a full-time undergraduate student (enrolled in a minimum of 12 hours)
  - b. I will have completed a minimum of 60 credit hours prior to participating in the program
  - c. I have maintained a minimum 2.0 GPA
10. I understand I may receive credit over two work terms totaling six (6) credits while attending Rockhurst University.

**I hereby agree to abide by the program provisions detailed above and authorize Career Services personnel to release my resume to any prospective Cooperative Education employers.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date