

COLUMBIA STATE COMMUNITY COLLEGE COOPERATIVE EDUCATION AGREEMENT

_____ hereby agrees to hire
(Company's Name)

_____ as a cooperative education student for _____ hours
(Student's Name)

per week during the _____ semester of _____ year.

Typical duties/learning activities to be performed during the semester will include:

At mid-term and the end of the semester, the workplace supervisor will evaluate the student (using Columbia State's Co-op evaluation forms) and recommend a grade for the student.

_____/date_____
(Student)

_____/date_____
(Workplace Supervisor)

phone _____

_____/date_____
(Faculty Sponsor)

address _____

phone _____

e-mail _____

address _____

fax _____

e-mail _____

fax _____