

**EL CENTRO COLLEGE
COOPERATIVE EDUCATION
Student Application**

Instructor/Coordinator _____
 Course _____ Number _____ Section _____ Semester _____ Year _____
 Name: Last _____ First _____
 Address _____
 City _____ State _____ Zip _____
 Social Security/ID Number _____ Phone (____) _____
 Ethnic Background: Black ___ Asian ___ Hispanic ___ White ___ American Indian ___ Other _____
 Date of Birth _____ Sex: Male _____ Female _____ U.S. Citizen? Yes _____ No _____
 Any disabilities that would affect a job assignment? _____

Degree Program:

- | | |
|--|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Internet Development Technologies |
| <input type="checkbox"/> Apparel & Pattern Design | <input type="checkbox"/> Management |
| <input type="checkbox"/> Computer Information Technology | <input type="checkbox"/> Medical Transcription |
| <input type="checkbox"/> Fashion Marketing | <input type="checkbox"/> Office Technology |
| <input type="checkbox"/> Food & Hospitality Services | <input type="checkbox"/> Paralegal |
| <input type="checkbox"/> Interior Design | |

Work Schedule					
Monday	Tuesday	Wednesday	Thursday	Friday	Add'l Hours
_____	_____	_____	_____	_____	_____

Present or Most Recent Employer _____ Phone (____) _____
 Address _____ City _____ State _____ Zip _____
 Approximate Hourly Salary _____ Hours Worked per Week _____

(Information about salary earned on Co-op/Intern assignments is used for statistical reports)

The following information is needed to evaluate your Co-op/Intern experience; you will be contacted at some time during the next five years.

Permanent Address _____
 City _____ State _____ Zip _____