



Coop/Internship

Date: _____

Business Name: _____

Address: _____

City _____ Zip Code _____

Contact Person: _____

Email Address: _____

Phone Number: _____

Number of workers needed: _____ Paid/Unpaid _____

Job Responsibilities: _____

(Internal Use)

Name of placed student: _____

Semester student was placed: _____

Coop/Internship: _____