



## Co-operative Work/Education Contract

(To be completed after student has been accepted to Coop and assigned to a Sponsoring organization)

Date \_\_\_\_\_ Semester \_\_\_\_\_ Year \_\_\_\_\_

Student Name/E-mail

School Address

Home Address

Cell Phone Number

Home Phone

Major

Concentration

\*This Portion of the Contract Refers to the Sponsoring Organization you will be working with.

Organization Name

Department Supervisor

Address

Phone

Fax

E-mail

### **Learning Agreement: Job Description**

The Job Description is to be determined by the Employer Supervisor. Please describe the tasks for the student, in as much detail as possible. This will serve as the written agreement between all parties involved. **Please attach a detailed Job Description given to you from your department supervisor.**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

### **Please Read Carefully and Sign the Contract's Terms and Conditions**

I have read the Contract and agree to fulfill the duties and responsibilities outlined for the program.

I will regularly work \_\_\_\_\_ hours per week for the semester beginning on \_\_\_\_\_.

I will fulfill all administrative requirements with The University of New Haven to ensure my participation in this program.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

I have discussed the Program with the student and have negotiated and assigned the work components which are identified above. I agree to act as the Student's Supervisor.

\_\_\_\_\_  
Sponsoring Organization's Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
U. New Haven Co-operative Work/Education Program Supervisor

\_\_\_\_\_  
Date