

INTERNATIONAL STUDENT COOPERATIVE EDUCATION ELIGIBILITY FORM

	Section I Eligib	ility	
() Mr.	_	·	
() Mrs			
Last Name	First Name	Middle Name	
has been referred by the Cooperative employed, nor registered for CO-OP complete the information below:			
Information for CO-OP()Fall	() Spring () Sumr	ner 20 Semester	r
Eligible for Cooperative Education W	ork Experience: () Yes	() No	
If yes, how many houCan this position be p	rs can the student work and? () Yes () No	oer week?	
International Counselor's Signature_		D	ate:
Type of Visa	_ Is this student in	status? () Yes () No
Number of semester attending BCC_			
SI	ECTION II EMPLOYMENT	INFORMATION	
Date:			
This student has found a position		th	at is related to his/her
Curriculum If this sign below.	student is eligible throu	gh immigration law to a	accept this position, please
STUDENT PLEA.	SE COMPLETE INFORMAT	TION BELOW – PRINT N	EATLY.
Employer:			
Address:	City	State	Zip Code
Employer Phone#	Email		
Hours per week:	_ () Paid () Unpa	id	
International Counselor's Signature		D	ate:
I understand that I need to attach a security letter is complete.	letter from my superviso	r to this form. I will be	contacted when the social
Student Signature			
For Office Use Only: Student Sevis#	Employment Verification		