

**Cooperative Education/Internships  
STUDENT DATA SHEET**

**Student:** Please print and complete all items. The coordinator will pick up this sheet on the first visit.

**PERSONAL DATA**

* Name: _____	Date: _____	SocSecNo: _____
* Permanent Address: _____	(city) _____	(ZIP) _____
* Mailing Address: _____	(city) _____	(ZIP) _____
* Home phone: _____	* Mobile phone: _____	
* Email: _____		

**EMPLOYMENT DATA**

* Employer: _____		
Emp. Address: (Street) _____	(City) _____	(ZIP) _____
Hourly wage: \$ _____	* Work station phone: _____	
(Confidential)		
Supervisor: _____	Supervisor phone: _____	

**ENROLLMENT DATA**

Semester: (Circle) Fall/Spring/Summer (Year) _____		
Credit hours in Co-op this semester: _____	* Major field of study: _____	
This is my: (Circle) First - Second - Third - Fourth semester to be enrolled in Co-op.		
Total hours of credit in Co-op or Internship, including this semester: _____		
How did you hear about Co-op and Internships? (Check all that apply)		
_____ The Co-op Office	_____ Mailing	_____ Another University/College
_____ Butler Advisor	_____ Friend/Family	_____ Co-op/Intern. Coordinator
_____ Brochures	_____ Co-Worker	_____ Other (explain) _____

<input type="checkbox"/> * I give permission to update my college records with this information	
Signature _____	Date _____