

Cooperative Education (“Co-op”) Program APPLICATION PACKET

This section is to be completed by the student.

This packet must be completed before a student can be registered in a Co-op (CWE—) course by Career Services. Once the packet is complete, return to Career Services to begin registration.

Course Contact:

Career Services
Room 150, Denius Student Center
(321) 674-8102 | career@fit.edu

➤ **TO BE COMPLETED BY STUDENT:**

I am applying to participate in the Florida Institute of Technology Cooperative Education program.

➤ I certify that I:

1. Am an international domestic student. **(Choose one)**
2. Am a(n) undergraduate graduate student. **(Choose one)**
3. Am a full time degree-seeking student at the Florida Tech main campus.
4. Have at least a 2.5 GPA** (if undergraduate) or a 3.0 GPA (if graduate).
5. Have completed at least 24 semester hours at Florida Tech, or one semester at Florida Tech if a transfer student. If a graduate student, I have completed one full-time semester at Florida Tech.
6. Will be enrolled in a Pass/Fail course with required assignments (found in Canvas)

**Undergrads who do not meet the minimum 2.5 GPA requirement must receive special-case authorization by their Academic Advisor on this application.

Student Name: _____ ID #: _____

Cooperative Education (“Co-op”) Student Agreement

This section is to be completed by the student.

Section 1: STUDENT NAME AND ACADEMIC STATUS

Last Name _____ First Name _____ M.I. _____
Student # _____ Major _____ Undergraduate Graduate (check one)
Overall GPA: _____ Credit Hours Earned Toward Degree: _____ Expected Grad Date: _____
US Citizen or Permanent Resident? Yes No International Student? Yes No Visa Status _____

Section 2: STUDENT CONTACT INFORMATION

Local Address _____
City _____ State _____ Zip _____ Local Phone (____) _____
Permanent Phone (____) _____ E-mail address _____

Section 3: JOB & EMPLOYER INFO:

Name of company: _____ Location of work site: _____
Your position title: _____ Pay rate or other compensation: _____
Name of direct supervisor: _____
Supervisor email/other contact: _____

Section 4: STUDENT AGREEMENT

I have read and fully understand the policies, procedures and commitment required for participation in the Florida Institute of Technology Cooperative Education Program, which include the following:

- Registering for Cooperative Education credit appropriate for the position accepted, and paying the associated \$110 Cooperative Education fee.
- Completing class assignments and evaluations in Canvas that will result in a Pass/Fail grade
- Completing an advising session with the office of Financial Aid, acknowledging that I understand any changes to my Financial Aid package that result from working full time in a co-op position.
- Receiving appropriate approvals from the office of International Student and Scholar Services (if an International student) and taking full responsibility for understanding all Federal and University regulations regarding off-campus employment.
- Completing a minimum of 1 semester of on-site employment with an approved co-op employer, or, if stated in the job offer letter, a multiple-semester commitment.
- Maintain good academic standing with a 2.5 overall undergraduate GPA or 3.0 overall graduate GPA.
- Progress toward degree completion while participating in Cooperative Education.
- Submit all required paperwork by the designated deadline dates.
- Notify Career Services about any concerns that may impact the success of my co-op experience.
- Satisfy academic and professional standards set by the University, the Cooperative Education Program and the Employer.
- Accept co-op work assignments at my own risk and recognize that the University is not liable for any damage incurred from or related to occurrences at co-op work sites.

Student Signature _____ Date

Financial Aid Agreement
&
Registration Fee

This section is to be completed by the student.

All students must be degree-seeking and enrolled at least half-time at FIT to be eligible for financial aid. Your initial award offer has been based on your enrollment projections for the first semester you indicated attendance during the academic year. Any changes in your anticipated enrollment may result in the revision or cancellation of your financial aid award. You must meet with Financial Aid regarding any questions or concerns you may have regarding enrollment in a co-op course.

Cooperative Education (“Co-op”) courses are not eligible for financial aid because there is no applied tuition.

There is a **\$110.00** registration fee **per semester** to enroll in a Co-op course, due at the time of registration. After dropping off your completed registration form to the Registrar’s Office, the payment can be made either in person at the Student Financial Services window (1st floor of Harris Commons) or on your PAWS account under “Student” Tab > “Payment/Student Account Information” option.

By signing below, you are indicating that you have read, understand, and agree to all information on this page:

Student Signature (print name): _____ Date: _____

Cooperative Education (“Co-op”) Academic Advising Agreement
This section must be completed & signed by student’s academic faculty advisor.

The student presenting this application has received an off-campus internship or job offer for the current or upcoming semester and is applying to register for the Cooperative Education (“Co-op”) Program to earn academic elective credit towards their degree*. As their faculty or academic advisor, your role in this process is:

- to ensure all criteria listed on this page is met or can be met
- to evaluate the quality of their work experience in relation to their field of study
- to assess the student’s readiness and academic maturity as it will relate to their success

To complete this page, you will need access to the student’s University records & the official offer letter presented to the student by the organization. The letter should include: company logo or letterhead, a company official’s signature, position start and end dates, position title, pay rate, and quantity of hours.

Before signing this form, you should review the details of the offer letter with the student and assess their current academic progress to identify any potential issues that could arise, specifically in respect to prerequisite courses that could be missed. Review the student’s academic program and verify they are registering for the appropriate experiential education course (e.g., if the department requires an internship for the student’s major, they should be enrolled in that course instead of Co-op).

*Graduate students and PhD candidates are not eligible to receive credit for Co-op.

Student’s Full Name:

ID #:

Undergraduate Graduate PhD | U.S. Citizen/Permanent Res. Non-U.S. Citizen (Visa Status: _____)

Major: _____ Major Code: _____ Current GPA: _____ Expected Graduation: _____

Semester of Co-op Registration: _____ First-time Co-op? Yes No

Company Name: _____

Student’s Position Title: _____

Duration of Employment: _____ - _____ | Full-Time (30+hurs/wk*) Part-time (_____/week)

**Per immigration guidelines, 20+ hours/week is considered full-time for international students.*

PLEASE CONFIRM THE FOLLOWING

FOR UNDERGRADUATE:

- Is a full-time, degree-seeking student at FIT
- Has cumulative GPA of at least 2.5** earned at FIT
- Has/will have satisfactorily completed at least 24 credit hours by Co-op start date

FOR GRADUATE:

- Is a full-time, degree-seeking student at FIT
- Has cumulative GPA of at least 3.0 earned at FIT
- Has satisfactorily completed at least one full-time semester at FIT

****Special-Case Authorization for Undergrad
GPA Below 2.5:**

By initialing this box, you are deeming the student fit to successfully fulfill the Co-op experience while maintaining their academic coursework responsibilities. By initialing, you are also confirming the student's awareness of their critical academic standing.

Advisor Initials: _____

FACULTY ADVISOR (PLEASE PRINT NAME):

EMAIL:

PHONE EXTENSION:

FACULTY ADVISOR SIGNATURE:

DATE: