Employer Information Form

Note: Students can only be placed with organizations having a current form on file.

Organization’s Name: ____________________________________________

Organization’s Contact Person:

Name __________________________________________________________

Title ___________________________________________________________

Address _________________________________________________________

City, State and Zip code __________________________________________

Telephone Fax Number ___________________________________________

E-Mail ___________________________________________________________

Website: _________________________________________________________

Estimated Opportunities For New Co-op Employment:

- Bio-Engineering
- Chemical/Petroleum Engineering
- Chemistry
- Civil/Environmental Engineering
- Information Technology
- Civil Engineering Technology
- Computer Engineering
- Computer Science
- Electrical Engineering
- Electrical Engineering Technology
- Engineering Physics
- Industrial Engineering
- Materials Science & Engineering
- Mechanical Engineering
- Mechanical Engineering Technology

Would you like resumes sent to you automatically each term?  Yes  No

Co-op terms:  Spring (Jan-April)  Summer (May-Aug)  Fall (Sept-Dec)
Brief company description:

Pay Scale, for co-op students (or attach a separate pay schedule):

Tour #1_________ Tour #2_________ Tour #3_________

Work location(s):

Work conditions, including any physical requirements of the job:

Work hours:

Company-paid benefits:

Method of transportation to reach work:

Extent of Housing Assistance, if provided:

On Campus Interviews:

☐ We wish to interview on campus. Our preferred date(s) for interviews are:
  1. ________________  2. ________________  3. ________________

  Note: Resumes will be sent to you beforehand, so you may choose which students you wish to interview.

Mail In Resumes:

☐ We will be unable to interview on campus. Please send us resumes for interested applicants.

Remarks:

Citizenship Requirements:

As stated in our information, students must have a co-op schedule approved by a faculty member and possess a 2.0 Q.P.A. in order to qualify for the co-op program. Does this criteria satisfy your company's requirements? If not, please note any changes necessary for us to follow.

☐ Yes, 2.0 QPA is acceptable  ☐ No, we would like a minimum QPA of: __________________________

I have read the enclosed Employer's Co-op Guide and agree to the terms of participation.
Co-op Employer Signature (please type if submitting electronically)

_________________________________________ Date:__