

Chaffey College Cooperative Education/ Work Experience

***Earn While
You Learn***

Student
Information
Sheet

Part A: Personal Data

Name _____

Street _____

City _____ State _____ Zip _____

Work Phone _____ Home Phone _____

Pager _____ Student ID _____

Date of Birth _____ Gender Male Female

How did you find out about Co-op: _____

Are you currently enrolled at Chaffey? Yes No

Do you have legal right to work in the U.S.? Yes No

Are you a financial aid recipient? Yes No

Have you been contacted by your worker? Yes No

What type of employment are you seeking? _____

How many hours per week? _____

Major: _____

Career Goal: _____

Educational Goal: AA Transfer:

Part C - Educational Background

Colleges Attended:

Name of College _____ State _____ Year _____

Name of College _____ State _____ Year _____

Name of College _____ State _____ Year _____

Part D - Past Employer Information

Dates of Employment From / to	Name of Employer	Duties Performed

Part E: Signature

I certify that, to the best of my knowledge, the above information is complete and accurate.

Applicants Signature _____ **Date** _____

For Office Use Only

Course enrolled in _____ Received by _____
Date _____