## Lyle School of Engineering Co-op Information and Financial Aid Form

Today's Date:		Student ID:			
First Name:La		t Name	Preferred Name_		
Local Address:	Street/Dorm	City	State	Zip	
Local Phone:	ocal Phone:		Mobile Phone:		
Perm. Address:					
	Street	City	State	Zip	
Perm. Phone:		W	ork Phone:		
SMU Email:	Email (other):				
Academic Major:		Degree T	ype:(circle one) B	3S BA 4+1	
Classification: (circle	one)	First Year	Sophomore	Junior	
SMU Credit Hours Co	ompleted:	Hours in Prog	ress: Total	Hours:	
SMU Cumulative GPA:  Non-First Year Studen		dent	Major GPA:		
Transfer Hours:			Transfer GPA:		
US Citizen? (circle or	ne) YES	NO			
If No, Permanent Res	sident? (circle on	e) YES	NO		
List all forms of finar scholarships)	ncial aid you rece	ive at SMU: (inclu	ude merit scholarships	, grants,	
How did you find out	about the Co-op	Program?			
When do you want to	start the Co-op	Program?			
Fall 200 S	Spring 200	Summer	200		