

Graduate Engineering Co-operative Education Program Agreement Southern Methodist University

Welcome to the SMU School of Engineering Graduate Co-op Program. Your decision to include work experience with your academic education will prove valuable for short and long-term success.

The following program rules are beneficial for all parties involved.

1. I understand that this is an academic enrichment program at SMU and it is my intent to graduate from SMU.
2. I understand my academic eligibility to participate in the Co-op Program rests with the Lyle School of Engineering. I understand that I must be in good academic, disciplinary, and financial standing with SMU before participating in the program.
3. I agree before I accept an offer of co-op employment with a specific employer that I will learn about the employer's policies concerning students. These policies include pay raises, benefits, times expected to work, time off from work, holidays, procedures and options for transferring among internal departments, procedures and options for obtaining full-time employment upon graduation, and all other policies regarding on-the-job conduct.
4. I understand that my co-op job must be related to my academic major and be approved by the appropriate Lyle School of Engineering personnel.
5. If I am an international student at SMU, I will receive written approval from the Designated School Official at the SMU International Student's Office before my co-op application credentials are submitted to any prospective employers. I will strictly obey any immigration and/or employment requirements placed on me by the SMU International Student's Office and United States law.
6. I authorize the Office of Graduate Professional Experience program to verify my co-op employment to determine the relevancy to my major and the full or part-time work status.
7. I will register for the co-op course associated with each co-op work term during the normal registration periods of the semester prior to each work term. I understand it is my responsibility to register for this course.
8. The course is ENGR 8199.
9. I agree to complete the grading requirement for each co-op work term. This includes writing a Co-op Student Summary of Work Experience. **I understand this work term summary must be submitted to my adviser and the Graduate Studies Office within two weeks of the end of the school semester or the last day of the co-op, whichever occurs first.**
10. I understand that I am subject to SMU's Student Code of Conduct, SMU's University Judicial Code, and other applicable university policies both at work and at school.
11. Based upon meeting the Co-op Program requirements, I understand that I will receive a grade of "P", (Pass) or "F" (Fail) for each co-op work term completed.
12. I understand that in order to participate in the Co-op Program, I must obtain written approval from:
 - A. Department Chair
 - B. Academic Adviser
 - C. Director, Co-op Program
 - D. International Student Office (for all international students)

Print Your Full Name: _____ (sign line below)

Major: _____ Adviser: _____

I, _____, ID # _____, agree to abide by the above rules. I understand any violation of the rules may subject me to removal from the program.

Student's Department Chair Signature

Student's Academic Adviser Signature

Co-op Director's Signature

Please complete the following information about your co-op employer and position.

Company Information:

Company:

Address:

Website:

Contact Name:

Title:

Department/Division:

Telephone Number:

Email Address:

Estimated Weekly Hours

Job Description:

Please describe your duties and responsibilities and how it relates to your major, class, etc. (You must attach a typed job description on company letter to this agreement.)