Cooperative Education Program

Business Majors
# Table of Contents

- Introduction ................................................................. 2
- Eligibility Requirements ..................................................... 2
- Application Process ......................................................... 3
- Application Form ............................................................ 4
- Learning Contract ........................................................... 6
- Request for Credit Form .................................................... 8
- Employer Information Data Sheet ......................................... 9
- Release of Transcript to Employer Form .............................. 10
- Confidential Faculty Recommendation Sheet ....................... 11

---

**Bowie State University**  
**Career Development Center**  
14000 Jericho Park Road  
Bowie, Maryland 20715  
(301) 860-3825/3829  
Email: rprice@bowiestate.edu
One of the most dynamic concepts in post-secondary education today is Cooperative Education. Though there are many variations of this program, Cooperative Education is basically an arrangement of combining study and work leading to the Baccalaureate Degree. The Cooperative Education student intersperses on-campus academic preparation with off-campus actual job experience. To implement Cooperative Education, a partnership is formed between the employer, University and the student. Some of the advantages and benefits of this partnership are as follows:

**As a Co-Op student you will:**
- Add relevance to your education
- Earn an income that will help defray tuition cost
- Receive academic credit
- Gain practical work experience in a job related to your major
- Work with professionals in your career field
- Discover if your career choice matches your interest and abilities
- Find the transition from college to a work environment easier after graduation

**Types of Cooperative Education Programs**
There are two types of Cooperative Education programs at Bowie State University that you can participate in.

**Parallel Co-Op** is like a part-time job. The student goes to school full-time and works each semester.

**Alternating Co-Op** is when the student alternates semesters between full-time work and full-time study.

**Eligibility Requirements for the Cooperative Education Program**
To receive academic credits, you must:
- Have completed a minimum of 24 credit hours of college.
- Be a sophomore, junior, senior, or graduate student with a minimum cumulative 2.5 GPA on a 4.0 scale. If you are a transfer student, you must have a minimum of 24 credits.
- Have a job that is related to your academic discipline.
Application Process for the Cooperative Education Program

1. Pick up the Cooperative Education Program application from the Career Development Center.

2. Meet with your faculty advisor and/or department chair to discuss receiving academic credit for your work experience. In order for the faculty advisor and/or department chair to make a decision, you **MUST** bring the following documents with you to the initial meeting:
   - Copy of your unofficial transcript
   - Copy of your job description
   - Learning Contract (page 6 of this packet)
   - Cooperative Education Request for Credit form (page 8 of this packet)

3. Once your faculty advisor and/or department chair has determined that academic credit can be earned, they will complete and sign the Learning Contract and the Cooperative Education Request for Credit form.

4. You must submit all completed documents to the Cooperative Education Coordinator in the Career Development Center.
   - Copy of your job description
   - Learning Contract
   - Cooperative Education Request for Credit form
   - Copy of your current resume
   - Release of Transcript to Employer form
   - Employer Information Data Sheet

Please note: You must provide a copy of your position description to the Co-Op Coordinator and your Faculty Advisor, as well as, the Learning Contract, in order to receive academic credits.

5. You must register for the applicable cooperative education credits as indicated by your faculty advisor and/or department chair.
APPLICATION FOR ADMISSION TO THE COOPERATIVE EDUCATION PROGRAM

Please Print Legibly

Date______________________________

PERSONAL DATA

Name_________________________________________ Student ID No__________________________

Email_________________________________________ Phone______________________________

Permanent Address____________________________________________________________________

City________________________ State_________________ Zip____________________

Campus Address_______________________________________________________________________

City________________________ State_________________ Zip____________________

Major_________________________ Minor___________________________________________

U.S. Citizen: □ Yes □ No Permanent Visa: □ Yes □ No

Military Service: □ Yes □ No Rank/Rating__________________________

Transfer Student? □ Yes □ No

Number of Transfer Hours________ Bowie State Hours Completed ______ Overall GPA____

Skills (clerical & computer):___________________________________________________________

Hobbies: ___________________________________________________________________________

Which High School or College Subject Did You Like Most_______________________________

Which High School or College Subject Did You Like Least _______________________________

Career Goals________________________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________
WORK PREFERENCE

Preferred Geographical Area for Work Site _______________________________________________________

Preferred Semester for Placement ________________________ □ Alternating □ Parallel
Semester / Year

Type of Work Experience Desired _____________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Check one or more of the following occupations in which you are interested:

□ Accounting        □ English        □ Mathematics
□ Biology           □ History        □ Physics
□ Chemistry (research lab) □ Journalism/Communication □ Psychology/Counseling
□ Computer Science □ Management      □ Sociology/Criminal Justice
□ Computer Technology □ Marketing      □ Other
□ Elementary Education □ MIS (Management Information Systems)

WORK HISTORY (Non Cooperative Education)

Current Employer Name __________________________________________________________

Prior Work Experience

<table>
<thead>
<tr>
<th>Date</th>
<th>Company</th>
<th>Location</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

APPROVAL OF PARENT OR GUARDIAN:

All students under 18 years of age must have the approval of a parent or guardian when making application to the Cooperative Education Program.

Parent or Guardian Signature ___________________________ Print Name ___________________________

Street Addresses, City, State, Zip Code ___________________________ Phone Number ___________________________
LEARNING CONTRACT

Date___________________  Student ID No.___________________

Name __________________________________________

Last  First  Middle Initial

Training Period________________________________________________________

Training Assignment______________  See attached position description______________

Employer_______________________________________________________________

Supervisor Name _____________________________  Title___________________________

Phone#________________________  Email____________________________

Student Schedule:  Days ____________________________________________________

Hours_______________________________________________________________

Co-Op Credits in Major   ☐ Yes  ☐ No  Free Elective   ☐ Yes  ☐ No

Learning objectives should be formulated by the student’s faculty advisor. Objectives should be specific, measurable, personal, within the student’s ability to accomplish, and in accordance with the curriculum. New learning objectives should be established for each semester co-op experience.

Learning Objectives
1.________________________________________________________________________________________

__________________________________________________________________

2.________________________________________________________________________________________

__________________________________________________________________

3.________________________________________________________________________________________

__________________________________________________________________
Training Assignment Evaluation

The student will demonstrate that he/she has achieved the objectives identified above by:

1. ____________________________________________________________________________________

2. ____________________________________________________________________________________

3. ____________________________________________________________________________________

(Use additional sheets if necessary)

Student Signature_________________________________________ Date_______________

Faculty Advisor Signature_________________________________ Date_______________

Department Chair Signature_______________________________ Date_______________

Co-Op Coordinator Signature_______________________________ Date_______________

Employer Signature________________________________________ Date_______________

Date completed_________________________ Semester applied_________________________________
COOPERATIVE EDUCATION REQUEST FOR CREDIT FORM FOR BUSINESS MAJORS

This form must be completed and submitted to your advisor prior to commencing your cooperative education experience.

In order to receive business elective credit:

(1) The cooperative education experience must be relevant to the department’s academic requirements;

(2) Prior to the commencement of a cooperative education experience, the employer must submit a letter indicating the student’s position, start and end dates, and supervisor, and a copy of the student’s position description;

(3) After the cooperative education experience has been completed the employer must submit an evaluation report confirming that the student has successfully completed the cooperative experience.

(4) **No more than three (3) business credits will be granted for the cooperative education experience.**

(5) **Accounting students cannot receive credit for the cooperative education experience.**

Name_________________________________________ Student ID#__________________________

Classification________ Major________________________ Telephone #____________________

Street Address_____________________________________________________________________

State & Zip Code____________________________________________________________________

Name of Cooperating Organization____________________________________________________

Supervisor______________________________________________________________

Street Address_____________________________________________________________________

State & Zip Code____________________________________________________________________

Job Title___________________________________________________________________________

Student Signature_________________________________________ Date__________________

Advisor Signature____________________________________________ Date__________________

Department Chairperson Signature______________________________ Date__________________

Co·Op Coordinator Signature________________________________________ Date____________
CO-OP EMPLOYER INFORMATION DATA SHEET

Student Name__________________________________________

Major__________________________________________________

Employer________________________________________________

Address__________________________________________________

Supervisor Name__________________________________________

Phone number (      ) ______-_______________________________

Supervisor Email (if applicable) ______________________________

Job description or statement of duties

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
Cooperative Education Program

RELEASE OF TRANSCRIPT TO EMPLOYER

I, ______________________________, give the Career Development Center permission to release my transcripts to employer(s) for consideration of employment through the Cooperative Education Program.

____________________________
Print Name

____________________________
Signed Name

___________________________
Date
CONFIDENTIAL FACULTY RECOMMENDATION

Dear______________________________:

I am registering with the Bowie State University Cooperative Education Program for a position. I would very much appreciate a recommendation from you. Will you kindly complete this recommendation form and send it to Ms. Rosetta Price Coordinator, Cooperative Education Program, Bowie State University, 14000 Jericho Park Road, Bowie, Maryland 20715, as soon as possible.

<table>
<thead>
<tr>
<th>My major is:</th>
<th>My minor is:</th>
</tr>
</thead>
</table>

Student Name: Date:

NOTE: Circle words which best describe the candidate. Omit any items where there is insufficient knowledge to make a reasonable degree of accuracy.

PERSONAL APPEARANCE:
excellent / satisfactory / bad first impression / appearance a handicap

PERSONALITY:
outstanding / very pleasing / average / slightly irritating / antagonistic / poor

COMMAND OF ENGLISH:
well-spoken/ deliberating/ weigh words/ at a loss/ ordinary for words/ limited vocabulary

SOCIAL MATURITY:
social / professional / mature for age / somewhat immature / immature

DISPOSITION:
enthusiastic / cheerful / reserved / apt to worry / pessimistic

COOPERATIVE:
works well with others / above average / works fairly well with others / works better alone / cannot work with others
LEADERSHIP:
natural leader / takes responsibility / seize opportunity / aggressive / has to be guided / always follows

JUDGEMENT:
exceptional / good common sense / dependable / fair / poor

RELIABILITY:
always on the job / usually on the job / ordinarily needs supervision / unreliable

INITIATIVE:
self-starter / usually seizes opportunities / starts under suggestion / needs prodding / passive and dependent

PHYSICAL ENERGY:
dynamic energy / energetic / average / lacking / sluggish

VOICE:
pleasing / agreeable / weak / loud / unpleasant

SCHOLARSHIP:
excellent / very good / good / fairly good / fair

REMARKS
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

______________________________________________________________________________

SIGNATURE _________________________ DATE ______________