



Sustainability and Resource Management Cooperative Work Experience Enrollment Form

Student Information

Name (First Last): _____ Student ID: _____
 Street Address: _____ Phone 1: _____
 City: _____ Phone 2: _____
 County: _____ Zip Code: _____
 Preferred Email: _____
 IVC Email: _____
 Currently enrolled in _____ units (other than CWE)

CWE Site/Business Information

Business Name: _____
 Business Address: _____
 City: _____ Zip Code: _____
 Supervisor's Name: _____
 Supervisor's Job Title & Duties: _____

 Supervisor's Direct Phone: _____
 Supervisor's Direct Email: _____
 Average Hours To Be Worked Weekly: _____ Are They Providing Workers' Compensation: _____

Registration Information

Intended Internship Start Date (i.e. Fall 2012): _____

Number of Units:

Mark the box that best matches how many hours you are going to work during the semester. Only mark 1 option. If you are completing multiple internships at multiple locations, a separate enrollment form must be completed for each location.

Paid Job

- 1 unit = 75 hours
- 2 units = 150 hours
- 3 units = 225 hours

Unpaid Job

- 1 unit = 60 hours
- 2 units = 120 hours
- 3 units = 225 hours

Student Signature: _____ Date: _____
 Supervisor Signature: _____ Date: _____