



## Cooperative Education Schedule Form

Undergraduate

AY 2022-2023

Student Name: \_\_\_\_\_ Email: \_\_\_\_\_ Peoplesoft #: \_\_\_\_\_

Class Year (i.e., 1<sup>st</sup> semester sophomore): \_\_\_\_\_ Anticipated Co-Op Start Term: \_\_\_\_\_

Please plan out your degree coursework by semester, including the semesters you intend to co-op (2 rotations required if doing co-op for capstone credit). Any changes must be approved by your advisor and the co-op office.

	Fall	Spring	Summer
Year 1	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
Year 2	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
Year 3	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
Year 4	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
Year 5	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_