

WESTERN CAROLINA UNIVERSITY  
**COOPERATIVE EDUCATION/INTERNSHIP JOB DESCRIPTION**  
CAREER SERVICES/CO-OP

1<sup>st</sup> Fl. Graham  
Cullowhee, NC 28723  
Telephone: (828) 227-7133 FAX (828) 227-7344

*Please complete and return to the address above.*

**Employer Information:**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Send resume to the attention of: \_\_\_\_\_

Title: \_\_\_\_\_

**WCU Approval for Credit:**

For Office Use:

Dept. \_\_\_\_\_

\_\_\_\_ Approve

\_\_\_\_ DO NOT Approve

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Position Information:**

Position Title: \_\_\_\_\_ Work Hours: \_\_\_\_\_ (30-40 hrs./wk.)  
\_\_\_\_\_ (15-20 hrs./wk.)

Location(s) of Positions: \_\_\_\_\_  
\_\_\_\_\_

Majors Preferred: \_\_\_\_\_

Application Requirements: (Check and fill in.) GPA Required: \_\_\_\_\_ Resume \_\_\_\_\_ Transcript

\_\_\_\_\_ Employer Application \_\_\_\_\_ Federal Forms (list) \_\_\_\_\_  
(Please attach any forms required)

Positions are: \_\_\_\_\_ Paid \_\_\_\_\_ Unpaid Pay Range \_\_\_\_\_

Application Deadline Date for: Spring Term \_\_\_\_\_ Summer Term \_\_\_\_\_ Fall Term \_\_\_\_\_  
(Jan. - May) (May - Aug.) (Aug. - Dec.)

**Brief Job Description:** (attach additional pages, if needed)

\_\_\_\_\_  
Signature of Employer Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone Number