UHCL Determination of Academic Eligibility for Co-op Program (Stage 1)
Include a copy of your approved Candidate Plan of Study and the Student Co-op Agreement with this application

Name: Last ___________________________ First _______________________________ Middle Initial____
UHCL ID # ___________________________ Major_____________________ Bachelor’s _____ Master’s_______
Expected Graduation Date__________ UHCL GPA_______________________
Phone _______________________________ Email ___________________________________________
Are you currently employed on-campus?   Yes_______ No________ If, yes, where?____________________
Are you a T/A,I/A or R/A or have you agreed to be one in the future?   Yes_____ No_______
If yes, for which professor and what semesters? _________________________________________________

• Bachelor’s Level Students Have you completed 12 UHCL credit hours?  Yes ____    No ____
If “no,” by when will you meet this requirement? ___________________________________
What freshman and sophomore courses do you have left to take? ________________________________

• Master’s Level Students Have you completed 9 UHCL credit hours in your graduate program?
  Yes _____ No _____ If “no” by when will you meet this requirement? __________________________
What Foundation courses do you have left to take? ____________________________________________

• Do you have a co-op job offer?
No____ Then stop and return this form with your Co-op agreement form and CPS to your Co-op advisor.
Yes_____ Then fill out a Co-op agreement form, Stage 2 application and return them to Career Service with a copy of your CPS and employer signed Job Offer Letter or Job Approval form.

------------------------ Office use only------------------------
Determination of Academic Eligibility for Co-op (Stage 1)
Date Sent__________     Career Services Approval __________________________________________
Date Sent__________     Associate Dean Approval __________________________________________
Eligible _________ Ineligible_________
Comments / Reason ineligible:

Items Included in S1 Packet       S1 form ____          Student Agreement ____        Transcript ____        CPS _____

State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law), (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.