



Building skills for Canada's bio-economy  
Un monde de ressources pour la bioéconomie canadienne

## Student Work Placement Program

### Co-op/Academic Agreement Form (Form 3 of 4)

PARTICIPANT NAME: _____		
POST SECONDARY INSTITUTION: _____		PROGRAM: _____
EMPLOYER: _____		CO-OP JOB TITLE: _____
START DATE OF CO-OP PLACEMENT: _____ (dd/mm/yyyy)		END DATE OF CO-OP PLACEMENT: _____ (dd/mm/yyyy)
ACADEMIC YEAR (at the time the co-op is being conducted): <div>Year 1      Year 2      Year 3      Year 4      Postgraduate      Masters      PhD</div> <div>Other _____</div>		
ENROLMENT STATUS: <div>Full-time student      Part-time student</div>		
PROGRAM START DATE: _____		EXPECTED GRADUATION DATE: _____
CO-OP ELIGIBILITY: The co-op placement must be full time, up to a maximum of 16 weeks. The participant is registered and enrolled in a full-time or part-time program at a Canadian post-secondary institution The co-op opportunity is with a bio-economy employer and/or The co-op opportunity is fulfilling a bio-economy job function		
CO-OP COORDINATOR/ACADEMIC CONTACT: _____ (name and title)		
PHONE NUMBER: _____		WORK EMAIL (Should include institution's email domain) _____
CO-OP COORDINATOR/ACADEMIC SIGNATURE: _____ Signatures <b>must</b> be digitally time stamped or hand written. Typed signatures are <b>NOT</b> accepted.		_____ Date (dd/mm/yyyy)
PARTICIPANT SIGNATURE: _____ Signatures <b>must</b> be digitally time stamped or hand written. Typed signatures are <b>NOT</b> accepted.		_____ Date (dd/mm/yyyy)