

## **Cooperative Work Experience (CWE)**

## End of the Semester Check List

(Instructor)						
Part I: Instr	uctor's Information					
Last, First Name	:			Employee ID:		
Email Address:				CWE Ticket #:		
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	dent's Information					
Last, First Name	:			Student ID:		
# of CWE units currently enrolled	f in:	Number of hours worked:		Employment Status Type:		Paid Unpaid
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Part III: Em	ployer's Information					
Company Name:						
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$\sqrt{}$	Student's Packet mus	st include th	e following forms:		Date: (	when submitted)
	Program Enrollment Application					
	Job Oriented Learning Objectives					
	Student Time Report					
	Employer's Evaluation of the Student					
	Student's Program Evaluation Survey					
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√	Instructor's Packet must include the following forms:					
	Final Roster					
	Grade Sheet					
	Payroll Timesheet					
Note: Instructor is paid 1 hour for each student that registers and 1 hour for each student that receives a final grade (Does Not include an "F" grade).						
FOR CWE OFFICE USE ONLY						
Received by:					Date:	
Comments:						
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