

**Office of Science Engagement (OSE)  
Graduate Student Cooperative Education Information and Credit Registration Form**

**CO-OP ASSIGNMENT**

Student Name: \_\_\_\_\_  
Student Email: \_\_\_\_\_

PSU ID: \_\_\_\_\_  
Student Phone: \_\_\_\_\_

Organization Name: \_\_\_\_\_ Organization Website: \_\_\_\_\_

**Supervisor Contact Information**

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

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Mailing City/State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Wage: \_\_\_\_\_

Department: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Hope to Learn from Experience: \_\_\_\_\_

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

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

**COURSE REGISTRATION INFORMATION**

Course Name	Sem/Year	# of Credits	Home State	Date Reg.	Initials

**Drop currently scheduled courses?**  Yes  No  N/A Comments: \_\_\_\_\_

**CO-OP HOUSING:**  Living at home  Arrangements made  Need info on housing

Comments: \_\_\_\_\_

**The Office of Science Engagement strongly recommends that you contact the Penn State Office of Student Aid and any financial institutions that offered you scholarships, fellowships, grants, or loans in the event those financial resources are affected by your participation in the Co-op Program.**

**VERIFICATION OF REGISTRATION**

*I understand that I will be registered for the courses/credits indicated above as a part of my participation in an assignment coordinated through the Office of Science Engagement. I will coordinate with my department/advisor regarding my course fees and/or submit the appropriate tuition payment to the Bursar in order to complete my registration for each semester that I will be completing an off-campus assignment. I will notify the Office of Science Engagement if my position extends past the date indicated above and may be permitted or required to register for subsequent credits as part of my extended assignment.*

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

OSE Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_