



**Creekside High School
CO-OP Registration Application
2020-2021 School Year**

Student Name: _____ Student ID: _____

(Please print first & last name)

Name of Employer/Organization: _____

Name of Supervisor: _____

Employer/Organization Phone#: _____

- Whether you are scheduled for 1, 2, or 3 periods of executive intern, you are required to work or volunteer a **minimum of 25 hours per month**.
- The senior schedule will have at least 4 classes. We cannot give a choice as to morning or afternoon dismissal. Core Classes will take priority over a Co-Op period placement.
- **Students must not be on campus when they are not scheduled for a class on campus. Continual violation of this will result in removal of the executive intern (Co-Op) period.** In addition, students do not need to work during this time either, as long as the minimum required 25 hours is met each month.
- **Documentation of the hours worked need to be submitted on or before the last school day of each month.** Acceptable documentation includes a pay stub or time sheet. Provide a paper copy.
- A letter grade will be awarded for each period of executive intern. Letter grades will be earned based on hours submitted and if hours were submitted on or before the last school day of each month. If hours are not submitted monthly the student will earn an "F" for the grading period.
- **The first 25 hours must be submitted on or before the last school day of September. 25 additional hours per month will be required for the months of October, November, December, January, February, March, and April.**

Student Agreement

I, _____ (STUDENT NAME), acknowledge the requirements of this course. I understand that if at any time my employment/volunteer duties cease **OR** if I fail to submit monthly timesheets, pay stubs, or volunteer log verifying that I completed a minimum of 25 hours, I will earn an F and NO credit for the course. I also understand that I must maintain my driving privileges and parking permit in order to remain in this course. Scheduling of this course, as with any other elective or class, is determined by the master schedule and **I will not have a choice in what periods this course is scheduled. They may be scheduled at the beginning of the day or at the end of the day.**

Student Signature: _____

Parent Signature: _____

RETURN COMPLETED FORM TO MR. PADGETT IN ROOM 120 BY MARCH 13th, 2020.