

Chemical Engineering Co-op Program Termination of Co-op Form

EMAIL COMPLETED FORM (PART 1 OR PART 2) TO CHE CO-OP COORDINATOR, THEN TO ASSIGNED ACADEMIC ADVISOR

PUID: LAST NAME: FIRST NAME:
EMAIL: ACADEMIC ADVISOR:
Timing of final Co-Op Work Session (semester/year):
PART 1.
I <u>no longer</u> wish to continue in the Co-op Program and I am officially resigning as of: (date)
I confirm that I have informed my Co-Op employer regarding my intention of resigning from the program
My reason for resigning is:
Student Signature:
ChE Co-op Coordinator Signature:
Assigned Advisor Signature:
Date:
PART 2
I <u>have been terminated</u> from the Co-op Program by the CHE Co-Op Coordinator and/or my Co-Op Company
Student Signature:
CHE Co-Op Coordinator Signature:
CHE Advisor Signature:
Date:
Reason for termination (for internal purposes only – to be filled in by the ChE Co-Op Coordinator):
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