Dear Employer:

Montclair State University is proud to offer its students the opportunity to engage in Cooperative Education. These work-based learning opportunities require suitable work experiences and it is our understanding that you might consider employing one of our students while they enroll in this pursuit.

This partnership revolves around many aspects, including the University’s willingness to award academic credit for the experience. Accordingly, we must pre-approve the position based on the professional nature of the work and the position’s relation to the student’s major and career goals. If you are interested in offering an immeasurably helpful experience to our students, please complete the reverse side of this letter. The student will then return this form to Cooperative Education for approval.

If the student is currently employed with your organization, they must provide the University with evidence that substantial new learning will take place during the Co-op semester. The best way to demonstrate new student learning is through one of the following:

- The student is promoted
- The student is given a different position within your organization
- Evidence of a new project that comprises at least 50% of the student’s time

In order to demonstrate new learning, please submit the following on company letterhead:

- Position/job descriptions for both the previous and new duties and responsibilities
- Complete the form on the reverse of this letter

Upon receipt of the appropriate descriptions and this form, you will be contacted by a representative of the Center for Career Services and Cooperative Education. If you have any questions, please contact Melissa Faulkner at 973-655-7612.

Thank you for your cooperation and for providing our students with such a tremendous opportunity.

Sincerely yours,

Melissa Faulkner
Director, Cooperative Education and Internships
The Center for Career Services and Cooperative Education

NOTE TO THE STUDENT: Once you have obtained this information from the employer, be sure to contact your Co-op counselor for approval and registration material.

Today’s Date: ___________________
MONTCLAIR STATE UNIVERSITY  
COOPERATIVE EDUCATION  
STUDENT DEVELOPED POSITION DESCRIPTION  

Concentration: __________________________

Major: __________________________

Student’s Name: __________________________

(Last) (First) (M.I.)

Student’s Position Title: __________________________

Company/Organization: __________________________

Address:

Mailing Address: If different,

(City) (State) (Zip)

Company Phone Number: __________________________

Company Fax Number: __________________________

E-Mail Address: __________________________

Co-op/Intern Duration: FROM: __________________________

TO: __________________________

Total Hours Per Week: __________________________

Hourly Salary: $ __________________________

Working Hours: __________________________

Days: __________________________

Full-Time: __________________________

Part-Time: __________________________

Name of student’s supervisor: __________________________

Supervisor’s mailing address: __________________________

Supervisor’s Title/Department: __________________________

(TITLE) (DEPARTMENT)

Supervisor’s Phone Number: __________________________

Fax Number: __________________________

Supervisor’s E-Mail Address: __________________________

Detailed Position Description:

_____________________________________________________

_____________________________________________________

Signature of Personnel Representative or Student’s Supervisor

FOR MSU USE ONLY:

Student Record No.: __________________________

Approved by MSU: __________________________

Date Entry Initials: __________________________

Not Approved: __________________________

Notes: ____________________________________________________________________________________