**Department of Computer Science – Texas State University**

**CS 3190/3290 Cooperative Education Approval Form**

***To be completed by student:***

Student Name: Click or tap here to enter text. Semester/Year: Click or tap here to enter text.

Student A-Number: Click or tap here to enter text. Net ID: Click or tap here to enter text.

Co-op Company Name: Click or tap here to enter text.

Worksite Address: Click or tap here to enter text.

Supervisor’s Name (print): Click or tap here to enter text.

**A midterm report and a final report will be required for this course.**



***To be completed by company supervisor:***

Student Start Date:Click or tap here to enter text. Estimated End Date: Click or tap here to enter text.

Number of hours scheduled to work per week: Click or tap here to enter text.

In the following space, please provide a description of the work to be done by the student.

Click or tap here to enter text.

**Supervisor - Please note that you are expected to review and comment on the student’s required midterm and final co-op course reports.**

**APPROVALS:**



Supervisor’s Email: Click or tap here to enter text.



Date: Click or tap here to enter text.