

APPENDIX 4

COOPERATIVE EDUCATION CONFERENCE/WORK APPLICATION REQUEST

This form is to be completed when you are requesting permission by your classroom teachers to be absent for a day or more because you need to be at your Cooperative Education placement for a special event, conference or function.

Student Information

Student Name:	Co-op Course Code:
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Placement Information

Work Placement Name:	Address:
Employer Name:	Telephone Number:

Reason You Need to Be at Your Co-op Placement

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Teacher Signatures

Period 1 Teacher

Period 2 Teacher

Period 3 Teacher

Period 4 Teacher

Period 5 Teacher

Administrator