

Graduate Co-op / Internship Application

Expected semester start at Purdue: _____

Expected Semester of first work session: _____

Personal Information

Name: _____

Purdue Student ID# _____ Sex: M F

Address: _____

City/State/Zip: _____ Email: _____

Phone: _____ Citizenship: _____ Cell: _____

Academic Information

School: _____
(ie. ECE, ME, CE, etc.)

Major: _____
(ie. MSEE, MSEVE, MSME, etc.)

Anticipated Date of Graduation: _____ GPA: _____

Academic Advisor: _____ Office Location: _____

Office Phone: _____ Advisor
Signature: _____ Date: _____

Required Documentation

Offer Letter