



Economic and Rural Development

2010-2011 Co-operative Employment Program - Winter

FINAL CLAIM FORM

PROJECT FILE#: 2010 _____

[Please print or type]

Name of hiring organization (as written on *Approval Letter*)

Division/Department (as written on *Approval Letter*), if applicable

If not submitting a **Record of Employment**, please sign here to signify that the student remains employed with your organization.
Signature: _____ **Date:** _____

Amount requested: \$ _____

Signature _____ Date: _____
(Contact person)

*Include the *Payroll Record* and a photocopy of the **Record of Employment** form, (if the student is being terminated), when returning this form by **January 14, 2011**.

<p>How to contact us —By Mail: Co-operative Employment Program Economic and Rural Development PO Box 2311 Halifax, NS B3J 3C8</p>	<p>By Courier: Co-operative Employment Program Economic and Rural Development 1660 Hollis Street, Suite 600 Halifax, NS B3J 1V7</p>	<p>By Phone or E-mail: Toll-free: 1-800-424-5418 Local: (902) 424-6000 Fax: (902) 424-0508 E-mail: sepinfo@gov.ns.ca</p>
<p>Website: www.gov.ns.ca/econ/sep</p>		