



Economic and Rural Development

2010 Co-operative Employment Program — Fall

STUDENT CONFIRMATION FORM

PROJECT FILE#: 2010 _____

[Please print or type]

Must be completed by the student, co-op coordinator and employer within five days of first day worked.

STUDENT— please complete this section, sign it, and then give it to your co-op coordinator. Thank you.

Last Name			First Name			Middle Initial				
Mailing Address		Street Number / PO Box		City/Town		Postal Code				
Home Telephone #				E-mail Address						
()										
Social Insurance Number			Date of Birth			Sex				
			dd:	mm:		yy:		M <input type="checkbox"/> F <input type="checkbox"/>		
Name of Educational Institution you will be attending this Fall					Field of study / Program of study					
Student Number		Start date at this institution			Date you expect to graduate					
		dd:	mm:		yy:		dd:	mm:		yy:

I **confirm** that the above information is correct and **give permission** for a copy of my **Record of Employment** to be sent to the Co-operative Employment Program, for the wage reimbursement claim.

Signature of Student					Date				
					dd:	mm:		yy:	

CO-OP INSTITUTION— COORDINATOR - please complete this section and return it to the Employer.

This is the student's: 1st 2nd 3rd 4th work term for program credit. (Check applicable year)

I confirm that all the above information is correct.

Signature of Co-op Coordinator					Date				
					dd:	mm:		yy:	

EMPLOYER—please complete this section, sign it, and **send** it to the Co-operative Employment Program **within five working days of student start date**.

Name of hiring organization

Division/Department (if applicable)

Student's Position Title		Hourly Wage		Hours per Week			
First Day Worked			Anticipated Last Day of Work				
dd:	mm:		yy:	dd:	mm:		yy:

I **confirm** that all of the above information is correct.

Signature of contact person					Date				
					dd:	mm:		yy:	

<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>
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Website: www.gov.ns.ca/econ/sep