

APPLICATION FOR CO-OP - FALL 2018

NAME:		
STUDENT #:		
EMAIL:		
	(UNB E-mail) (Alternate E-mail)	
ARE YOU AN INTERNATIONAL STUDENT W	VHO WILL REQUIRE A CO-OP WORK PERMIT?	Yes No
ADDRESS:		
CITY:	PROVINCE:	
POSTAL CODE:		
TELEPHONE #:	CELL #:	
CONTACT INFORMATION FOR SUMMER 2	O40 ('f d'ffarant than all and)	
CONTACT INFORMATION FOR SUMMER 2	018 (if different than above)	
ADDRESS:		
CITY:	PROVINCE:	
POSTAL CODE:	COUNTRY:	
HOME TELEPHONE #:		

Please attach a minimum one-page, two-paragraph outline of why the co-op program is something you are interested in participating in and why you might make a good candidate for it. Remember that this is a competitive program and these letters can make a difference to your selection.

PLEASE SUBMIT COMPLETED APPLICATIONS BY JUNE 29, 2018 TO: Dean of Arts Office, Hazen Hall 201 OR artssj@unb.ca