SAN JOSE/EVERGREEN COMMUNITY COLLEGE DISTRICT Work Experience Education Application

SJ/ECCD provides equal opportunity to all students, without regard to age, ethnicity, sex or handicap in its educational programs and activities.

Student	ID Number			College Ma	jor or Trade		Fall Summer Spring 20		
Name (I	.ast, First, MI)				Employer (name of company or work site)				
Address	(Number & Street, Apt. #)				Work Address	City	State	Zip	
City	ity State Zip ome Phone ()			-	Work Phone ()	Neare	est cross street		
Cell # ()					Supervisor's Name				
Home e-mail Address					Phone ()				
Work e-ı	nail Address								
Current Class Schedule (include Work Experience)					Supervisor's e-mail Address				
Section	Course Title	Units	Day	Instructor					
					Student's work schedule				
					List of job duties:				
					,				
					Student's hours worked per week				
l und a) b)	erstand that in order to receive of not exceed in taking more than a work 54 hours paid employment p	total of	14 Wo	rk Experience ur	nits.				
	Print Name Here	IOTE: E	Be sure	to notify your	Signature coordinator of any job changes		Date		
				Coordinato	or use ONLY				
	EVC SJCC			Credit/No Cre	edit Letter Grade New		Returni	ng	
Application approved					Date	Section # _			
		Experie	nce Ur	its Completed (14 max.) Total College U	nits Complet	ed		