Portland Community College

P.O. Box 19000
Portland, Oregon 97280-0990

Cooperative Education

Learning Objectives

Due Date _____

Student	*Supervisor/ Title*
Program Major/Instructor *Job Title*	*Agency/Company* *Phone*
Term *email*	*Address*
Student Work Phone *Home Phone*	*City* *Zip* *Fax*

Work Schedule: Mon _____ Tues _____ Wed _____ Thur _____ Fri _____ Sat _____ Sun _____

The Learning Objectives/Activities listed here will describe the student's job related goals and the work site activities to meet those goals. See the **Cooperative Education Student Handbook** for details.

OBJECTIVE: What do you want to learn?	**Activities:** What will you do to learn it?
1 a. Objective:	
b. Activities:	
2 a. Objective:	
b. Activities:	
3 a. Objective:	
b. Activities:	
4 a. Objective:	
b. Activities:	
5 a. Objective:	
b. Activities:	

Work schedule and duties may be subject to change. Contact your Cooperative Education Specialist should any major changes occur.

Student Signature	***Date***	***Employer Signature***	***Date***
Instructor Signature	***Date***	***Coop. Ed. Specialist***	***Date***

Portland Community College is an Equal Opportunity Employer and committed to a policy of non-discrimination for all people regardless of race, color, religion, sex, age, disability or national origin.

Distribution: White - Coop. Ed Specialist Yellow - Student Pink- Employer

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