



## **Co-Operative Experience**

### **XXXX [Program Designator/Subject] 398 Co-Op Experience**

**Co-Operative Experience** is defined as a full-time work-based learning experience for undergraduate students during a maximum of two terms (one summer and either a fall or spring term) prior to completion of at least one remaining academic term leading to graduation. No more than two term registrations of 398 will be allowed for undergraduate students.

The expectation is that students would work in a field related to their university studies, and that they would be paid for their work by their employer; therefore, the Co-Operative Experience is not eligible for veterans' benefits or for Financial Aid. However, enrollment in a Co-Operative Experience allows students to retain their full-time status as students so loans would not enter repayment status. International students registered for XXXX 398 must pay their health insurance while participating in the Co-Op Experience.

Students seeking a co-op experience should contact the Career Development Center or their program's internship advisor for search and application assistance. Each College/department may require additional steps or documentation before approving a Co-Operative Experience.

#### **1. Eligibility for a Co-Operative Experience:**

##### **Applicants:**

- must have completed a minimum of one semester as a degree seeking student at the undergraduate level (**international students must complete two semesters to be eligible for off-campus employment authorization**)
- students must agree to return to Minnesota State University, Mankato for a minimum of one semester of academic study with enrollment of at least 6 credits immediately following the term of their Co-Operative Experience.
- **International students must provide an offer letter to the KIC for the required employment authorization to be approved**

## 2. Approval process for Registration for the Co-Operative Experience:

### Applicants:

- must fill out a Co-Operative Agreement Form to submit to the Office of Registration & Academic Records. Students need to secure the appropriate approval signatures from the (1) the faculty member serving as instructor of record, (2) the department chair, (3) the immigration advisor, if student is an international student, and (4) the Office of Registration & Academic Records.
- **The registration will be for a maximum of one summer term and one contiguous term (either spring or fall).**
- **The approval process SHOULD BE COMPLETED 5 days PRIOR to the term in which the student will begin the full-time experience.**

## 3. Financial considerations:

- International students participating in a Co-Operative Experience must also pay the health insurance premium for the terms they are registered for this experience.
- the Co-Operative Experience will not qualify for veteran's benefits or for Financial Aid

4. **XXX 398 Co-Op Transcript Notation:** 398 Co-Operative Experience indicates the student is a full-time student involved in a full-time Co-Operative Experience. Registration requires no fees or tuition. The registration will be completed directly through the Registrar's Office, not through the online registration process.

5. **Grades/Evaluation for a Co-Operative Experience:** The course will be evaluated as Pass/No Credit based on successful or unsuccessful completion of the Co-operative Experience. Students should speak to their instructor about the specific requirements for the Co-Operative Experience.

6. **Additional Coursework:** Students are NOT encouraged to take additional coursework while on a Co-Operative Experience. The intention to take up to a maximum of 6 credits during the curricular practical training **MUST** be indicated in the original application and approved by the department. Students are responsible for completing the registration and paying tuition and fees for these additional credits.



### Co-Operative Agreement Form

The usual definition of a Co-Operative Experience is a student working with a university-approved agency or company for full-time work experience for a maximum of one summer and one contiguous spring or fall term. Any submission to the National Student Clearinghouse will indicate that you are a full-time student if you have an official Co-Operative Agreement Form with an academic department.

#### For all undergraduate applicants:

Yes	No	I have completed a minimum of one semester as a degree seeking student at the undergraduate level. If I'm an international student, I will have completed a minimum of two semesters.
Yes	No	I plan to return to Minnesota State Mankato for a minimum of one academic term following the Co-Operative Experience.
Yes	No	I am registered for other academic credits during this term. If yes, please list the courses:

My signature below indicates that I understand the above information to be true and that I have read and understand the information below concerning my participation in a Co-Operative Experience.

1. Co-Operative Experience registration maintains full-time student status, is graded as Pass or No Credit, and is for 0 credits. There are no fees or tuition assessed for this registration.
2. A subject designator and 398 Co-Operative Experience will appear on my academic transcript indicating my status as a CO-OP student.
3. **I must submit a completed Co-op Agreement form by the first week of EACH term I am on Co-Operative Experience. No retroactive recording of Co-Ops will occur.**
4. I may not enroll in more than two terms in 398 Co-Operative Experience.
5. 398 Co-Operative Experience is **not** valid for veteran's benefits.
6. 398 Co-Operative Experience is **not** approved for financial aid.

**I understand and accept this CO-OP agreement:**

\_\_\_\_\_  
Student Name (please print)

\_\_\_\_\_  
Tech ID

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**I approve of this CO-OP agreement.**

398 Instructor Name (please print)

Instructor Signature

Date

Fall

398

Spring

Subject (ACCT, IBUS, etc)

Summer

*\*\*Please indicate the course pref-fix  
and the associated term + year  
e.g.: ACCT 398 Spring 2025*

Date

Department:

Department Chair Signature

Date

\*Immigration Advisor Signature, if applicable

Date

Registrar Signature

Date