

This agreement is designed to comply with the requirements of Nova Scotia's Freedom of Information and Protection of Privacy Act (FOIPOP). It reflects your right to privacy and permits the Co-op Office to disclose relevant information about you to current and potential co-op employers. It also stipulates co-op regulations and policies.

It is intended to assure procedural fairness for all individuals by articulating one set of principles governing co-op students at Mount Saint Vincent University (the Mount). These Terms and Conditions are in addition to those regulations listed in your respective program description section in the Mount Undergraduate Academic Calendar and the Student Guide to Co-operative Education.

## Academic

---

I understand that I must comply with the academic standards and regulations as outlined in the program description sections of the Mount Undergraduate Academic Calendar.

I understand that it is my responsibility to ensure that I am registered for each co-op term. I understand that to maintain my co-op status I must be registered as a full-time student in either an academic term or a co-op term, including before and after each co-op term.

I agree to sign a Learning Agreement with the university upon confirmation of securing employment for each co-op term.

I understand that when I accept a co-op term, I am committing to undertake and complete that co-op term. I understand that I may not terminate a co-op term, or change the conditions of employment, without first discussing the situation with the Co-op Office. I understand that leaving a co-op term without permission results in a "Fail" for the co-op term and a dismissal from the Co-operative Education Program.

I understand that evaluation for successful completion of a co-op term is comprised of a) work site visit; b) employer evaluation; and c) work term report/project. The results of the co-op term are indicated on my academic transcript, with three possible grades (Pass, Fail and No Credit, Repeat).

I understand that the work term report/project requirements must be submitted by the deadline(s) outlined in the work term report/project guidelines or by the deadline(s) communicated by the Co-op Office and/or co-op faculty advisor.

I understand that since co-op terms are considered to be a full-time course of studies, I am not expected to take courses while on a co-op work term. However, I can register for one-half unit of credit while on a co-op work term. In order to take a course while on co-op, I must notify my employer prior to the beginning of the work term to ensure the course will not interfere with my work term. I understand the academic department will de-register me from courses should I register for more than one-half unit of credit.

I agree to alternate co-op terms and study terms according to the academic course sequencing plan prescribed by my academic department. I understand that only under specific circumstances outlined in the Student Guide to Co-operative Education would I be able to defer a co-op term. Application for a deferral must be made in writing to the Co-op Office. Students who qualify may only defer one co-op term.

I understand that in an optional Co-operative Education Program, I am able to withdraw during my program at any time except when on a co-op term, or once a co-op position has been confirmed for the subsequent co-op term. Otherwise, withdrawing from the program will result in academic penalty. I must notify the Co-op Office if I intend to withdraw and complete the Student Release form. I understand that a "W" (withdrawal) will be added to my transcript to reflect this change and I will be assigned withdrawal fees as outlined in the *Student Guide to Co-operative Education*.

I understand that not meeting the academic standards for the Co-operative Education Program as published in the Mount Undergraduate Academic Calendar, or failing a co-op term, will result in automatic dismissal from the Co-operative Education Program.

Initial here \_\_\_\_\_

## Freedom of Information Protection of Privacy Act - FOIPOP

---

I give my consent to the Co-op Office to disclose and release personal information consisting of my résumé, unofficial transcripts, reference list, and to discuss my academic records, employment history, co-op work term performance, references and qualifications to co-op employers for the purpose of assisting me in securing and maintaining employment while I am enrolled in the Co-operative Education Program.

Initial here \_\_\_\_\_

## Accessibility Services

---

I understand that if I am a student with a disability who may require accommodations in the workplace, I will register with the University's Accessibility Services as soon as possible.

If I am a student with a disability, I understand that I am encouraged to discuss my required accommodations with a co-op coordinator as soon as possible in order to access the information and support needed to succeed in the co-op process and in the workplace.

Initial here \_\_\_\_\_

## Co-operative Education Policies and Procedures

---

I understand that I am required to attend and complete the Co-operative Education Professional Development (PD) Sessions. These PD Sessions are a prerequisite for my first co-op term. I understand that after my first and second co-op terms I will be required to participate in return-to-campus activities, such as updating my resume and reference list before being able to apply for co-op positions.

The Co-operative Education Program facilitates all co-op job offers for positions posted by the Co-op Office. I should not accept any job offers made directly from a co-op employer until I have consulted with the Co-op Office.

I understand that if I am an international student, it is my responsibility to apply for a work permit and Social Insurance Number to secure a co-op term. I understand I am not eligible to begin my co-op work term without a work permit and Social Insurance Number.

I understand that once I receive a co-op job offer, I have 24 business hours to confirm with the Co-op Office whether I am accepting or declining the job offer (i.e. if I receive a job offer at 3:00 pm on Friday, I will have until 2:59 pm on Monday to accept). I understand that if I do not accept or decline a job offer within 24 business hours, it will count as a decline and the offer will be released to the next ranked student.

I understand that I will be assigned a Self-Directed Job Search Status if I decline more than two job offers and/or interviews.

I understand that if I do not sign up for an interview by 9:00 a.m. the business day prior to an interview I will be removed from the interview shortlist and it will be counted as a missed opportunity.

I understand that once I decide to accept a job offer, I must contact the Co-op Office to cancel any additional upcoming interviews no later than two business hours before the scheduled interview time.

I understand tuition and withdrawal fees apply to each co-op term. Tuition fees are payable to Financial Services by the last business day of the second month of each co-op term.

I understand that if I wish to pursue an entrepreneurial co-op work term, I will consult with the Co-op Office and submit the information outlined in the "Entrepreneurial Co-op Term Application" located on the co-op website.

Initial here \_\_\_\_\_

## Co-op Competition Process

---

I agree to comply with the open competition process and actively participate in this process until I secure a co-op work term. I understand that not securing a work term will result in having to defer it to a future semester, which may delay my graduation date. Students can only defer one co-op term; any subsequent deferral requests will result in dismissal from the co-op/academic program.

I agree to meet all deadlines for co-op job postings and provide cover letters and résumés, and where applicable, references, transcripts and/or work samples.

I understand that I must be on campus to participate in the interview process until such time as I have secured an approved co-op work term.

I understand that participation in the Co-operative Education Program may require me to apply for and accept positions anywhere in Canada in order to secure a position. Once I have accepted a position, I understand I will be responsible for the necessary travel expenses to relocate when the employer does not subsidize these expenses.

I understand that co-op terms are paid employment and reflect the organization's salary scale and the student's level of experience. I understand that co-op terms are a minimum of 13 weeks in duration, a minimum of 35 hours of paid employment per week, and continuous employment with one organization.

I understand that I am committed to the position once an offer has been accepted either verbally, electronically or in writing. I understand at this point that I am no longer eligible for other co-op opportunities for this term.

Initial here \_\_\_\_\_

## In the Workplace

---

I understand it is my responsibility to request two copies of my signed contract from my employer at the beginning of my co-op term, in order to retain one copy for myself and to forward one copy to the Co-op Office.

I understand that while on a co-op term I am representing my educational program and the University and therefore agree to conduct myself in a professional and ethical manner. I agree to abide by my co-op employer's policies, procedures, guidelines and code of conduct.

I understand that as a co-op student, I am representing my co-op employer. Therefore, I will adhere to policies and legal requirements when using the Internet and email. As a user, I will comply with the license agreements associated with computer software. I agree to use the internet responsibly and productively while on a co-op term.

I understand that documents that I complete or have access to during a co-op term are the intellectual property of the employer. I am not entitled to accessing this information outside of the co-op term without the expressed written consent from the employer.

I understand that if I experience any serious difficulties or conflicts in the workplace throughout the course of my co-op term, I agree to attempt resolution of these issues with my co-workers and/or supervisors and to communicate with the Co-op Office so they can provide support and guidance.

I understand that if my co-op term is interrupted (e.g. lay off), the University will make every effort to ensure alternate arrangements so that I can receive academic credit for my co-op term. I understand that the University does not accept responsibility for lost earnings.

Initial here \_\_\_\_\_

## Own Job Search

---

I agree to allow the Co-op Office to solicit positions on my behalf and agree not to solicit positions from a co-op employer directly on my own behalf. I will advise the Co-op Office if I pursue my own co-op position and I will sign the Job Search Agreement form.

If I secure my own co-op position I understand that the Co-op Office must approve the position. A job description, start and end dates, confirmation of hours, salary and employer's contact information must be submitted for approval prior to my accepting the position.

I understand that if I secure my own co-op work term, I am committed to this position once an offer has been accepted either verbally or in writing. I understand at this point that I am no longer eligible for other co-op opportunities for this term.

Initial here \_\_\_\_\_

---

I have read the above Terms and Conditions of enrolment in the Co-operative Education Program and I agree to abide by them during my participation in the Co-operative Education Program. I understand that failure to comply with any of the above can result in my being required to withdraw from the Co-operative Education Program.

- AND -

-

I have read the information in my respective program description section in the Mount Academic Calendar and the Student Guide to Co-operative Education and I agree to abide by this information during my participation in the Co-operative Education Program. I understand that failure to comply with any of the above can result in my being required to withdraw from the Co-operative Education Program.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Please print clearly)

Date: \_\_\_\_\_

## Completing the following information is voluntary

---

The information will be used by the Co-op Office for statistical purposes, funding opportunities and potential scholarships/bursaries. Information about individuals will not be released without the student's expressed written permission.

I am:

- Canadian Citizen
- Landed Immigrant/Permanent Resident
- International Student

I require special assistance by reason of a disability:

- Yes
- No

I am a member of a visible minority group:

- Yes
- No

Revised: June 19, 2018