

**CULINARY and/or HOSPITALITY & TOURISM**  
**COOPERATIVE EDUCATION PROJECT REPORT**

PART I – Cover Page

Name \_\_\_\_\_

Student ID Number \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Course Title \_\_\_\_\_

Course Number \_\_\_\_\_

Section Number \_\_\_\_\_

Beginning Date of Co-op Work Period \_\_\_\_\_

Ending Date of Co-op Work Period \_\_\_\_\_

NOTE: All required paperwork must be turned in to your respective Co-op Departmental Advisor and the Co-op Staff (Gil Bixel).

**Hospitality & Tourism Management Students Mr. Sandy Southerland**

**Culinary Management Students Chef Travis Herr**

\*All course requirements must be completed before a passing grade will be assigned for your Co-op credits.













