Coop Application
WDHS

Coop Teachers: Ms. O'Connor, Mr. McGregor

Name: _____

Email: _____

Home Phone: _____

Cell Phone: _____

Date: _____ Current Grade: _____

Coop Selected (Choose one only)
- ☐ Full Day
- ☐ Half Day

Transportation to My Coop Placement (Choose one only)
- ☐ I have access to my own transportation to coop every day
- ☐ I will walk to Coop from school

Type of Placement Requested

- ☐ 1st Choice _____

- ☐ 2nd Choice _____

Submit Completed Application to Coop Office Rm 1140