

West Virginia Department of Transportation
Division of Highways
1900 Kanawha Blvd. E., Bldg. 5
Charleston, WV 25305

CIVIL ENGINEERING CO-OP APPLICATION

Human Resources Division, Capitol Complex, Bldg. 5, Rm. A-949, Charleston, WV 25305-0430
(Please type or print all information)

NAME: _____ **SOCIAL SECURITY**
Last First Middle **NUMBER:** _____ - _____ - _____

ADDRESS: (Notification of job offer will be sent here)

P.O. Box/Street Address

City State Zip Code

Phone: (Area Code and Number) _____ Cell Phone: (Area Code and Number) _____

SCHOOL NAME: _____

List in order of preference **three** Districts in which you will accept employment (see attached map for District locations). The central office in Charleston should be listed as Central Office. You will be assigned to one of your choices according to our needs. When you report to work on the first day the District will try to assign you a work assignment as close as possible to the county in which you want to work. Please note in the remarks section any special considerations we should know before placing you in a location that is not your first choice.

DISTRICT (Dist-1, etc.)	AREA (construction, bridge, maintenance, design, etc.)	REMARKS
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

AN EQUAL OPPORTUNITY EMPLOYER

The Department of Transportation, Division of Highways is an equal opportunity employer, offering employment without regard to race, color, religion, sex, national origin, age, or citizenship unless legally required, and provides Equal Employment Opportunity to handicapped individuals.

LIST ALL WORK EXPERIENCE BEGINNING WITH YOUR MOST RECENT JOB AND WORK BACK.

1	Employment Dates: Month/Year to Month/Year	Employer Name:	Job Title:
	Description of Duties:		

2	Employment Dates: Month/Year to Month/Year	Employer Name:	Job Title:
	Description of Duties:		

3	Employment Dates: Month/Year to Month/Year	Employer Name:	Job Title:
	Description of Duties:		

4	Employment Dates: Month/Year to Month/Year	Employer Name:	Job Title:
	Description of Duties:		

PLEASE LIST THE HOURS YOU HAVE TAKEN AND ARE ENROLLED IN THIS SEMESTER:

School Name:	Hours Completed:	Hours Enrolled This Semester:	Total Hours:
(Undergraduate)			
(Graduate)			

NOTE: You must also attach an unofficial copy of your most recent transcript.

EXPECTED GRADUATION DATE (month/year): _____

Please explain why you want to work for the Division of Highways:

AFFIRMATION: Your signature certifies that all statements are true and complete.

Signature: _____ Date: _____

If you attend an in-state school, you must return your application to your Civil Engineering Department.

**If you attend an out-of-state school, return your application to:
Human Resources Division
Capitol Complex, Bldg. 5, Rm. A-949
Charleston, WV 25305-0430
Attn: Civil Engineering Summer Internship Program**

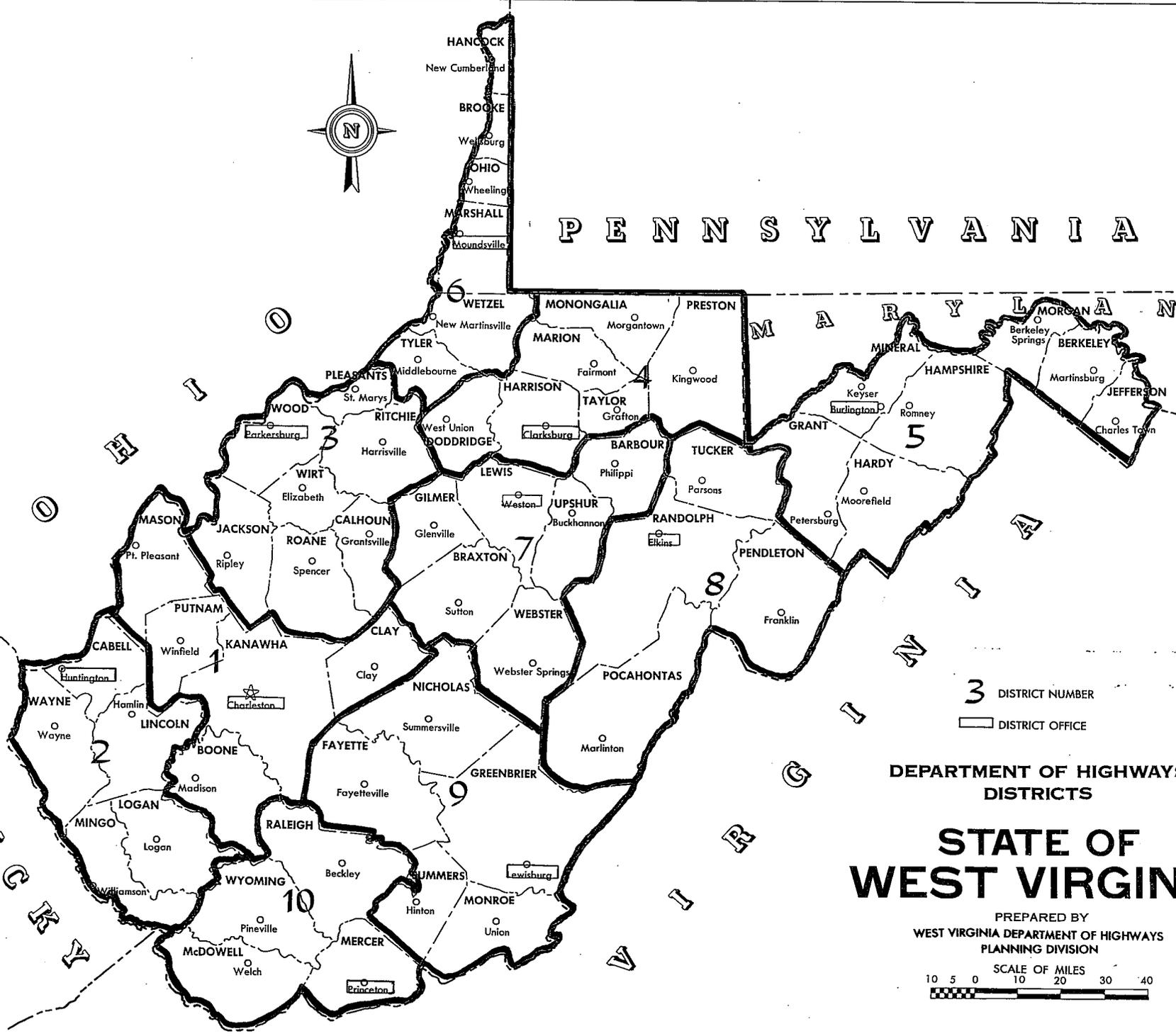


P E N N S Y L V A N I A

M A R Y L A N D

K E N T U C K Y

G I R G I N I A



3 DISTRICT NUMBER
□ DISTRICT OFFICE

DEPARTMENT OF HIGHWAYS
DISTRICTS

STATE OF WEST VIRGINIA

PREPARED BY
WEST VIRGINIA DEPARTMENT OF HIGHWAYS
PLANNING DIVISION

