

Instructions for Risk Assumption Form:

We received your Co-op and Internship Information Sheet from your supervisor. In order to register you for your Co-op or internship course, we need you to complete a Risk Assumption Form that will be/has been provided to you. Please fill it out and return with signatures as soon as possible. If you have not received it yet, please contact our office for your individualized copy.

The witness can be anyone over the age of 18, but cannot be associated with the Career Development Center, SIUE or your employer. A roommate, significant other, parent, etc. are all appropriate witnesses.

This can be mailed, emailed, faxed, or dropped off (we have a drop box outside our office).

Our mailing address is:
Career Development Center
Attn: Tammy Dugan
0281 Student Success Center
Box 1620
Edwardsville, IL 62026