

Curricular Practical Training (CPT) Request Form

Curricular Practical Training (CPT) is an opportunity to earn practical skills and training while studying full-time as an F-1 student. F-1 students must have been in the US for 1 full academic year before requesting CPT; MBA students are the exception to this rule. CPT must be considered "an integral part of an established curriculum" and "directly related to the student's major area of study." If an internship, research position, or professional experience is not required, the student must receive adequate credit for this experience and it must 1) be directly related to one's field of study, 2) directly related to coursework being fulfilled and 3) must be approved by the student's Academic Advisor.

Please complete the following form and return to the Center for Global Education in order to authorize CPT and print a new Form 1-20 with CPT authorization. It is required to have the back side of this form completed by your Academic Advisor.

Student Name: _____ Date: _____

Describe

CPT: _____

Which course or program requirement does this CPT opportunity fulfill? _____

Internship/Research Title: _____

Desired Start Date: _____ Desired End Date: _____

Hours per Week: _____

Circle one: Full-Time (40 hours a week or more) Part-Time (under 40 hours a week)

Location of CPT: _____

Address: _____ On-site Supervisor : _____

_____ Phone #: _____

For Academic Advisor to Complete:

Advisor Name: _____ Department: _____

This student has requested Curricular Practical Training (CPT) that matches his/her course of study and is a core part of the student's curriculum. This student is completing CPT by fulfilling a course requirement (such as a required internship or professional experience); or the student is completing an internship that directly relates to his/her field of study, matches coursework, and will be registered for credit. I have spoken with my advisee, reviewed this sheet, and endorse this student for CPT.

Advisor Signature: _____ Date: _____

The information I have provided on this sheet is accurate to the best of my knowledge. I understand that it is my responsibility to fulfill the requirements of CPT. Part of these requirements include being enrolled in a full course of study (at least 12 credits at the UG level, and at least 9 credits at the grad level). I understand the severity of working without authorization in the United States which includes working at an unauthorized location, completing different work responsibilities and hours, other than what is stipulated on my Form I-20. I understand that if I render CPT full time (More than 40 hours of work per week) for 12 months, I forfeit my privilege to apply for Optional Practical Training (OPT). I acknowledge my responsibility to check in with the Center for Global Education and communicate regularly with my Academic Advisor to report updates on my CPT experience.

Student Signature: _____ Date: _____

Once this form is completed, please schedule an appointment with the Center for Global Education to review CPT request and to schedule an update to Form I-20, authorizing CPT, if CPT is approved.