### F-1 CURRICULAR PRACTICAL TRAINING INSTRUCTIONS and RECOMMENDATION FORM

**DEFINITION:** CURRICULAR PRACTICAL TRAINING (CPT) is an opportunity for international students in F-1 status to participate in professional, temporary employment such as an internship, co-op program, practicum or similar situation, which is undertaken prior to the completion of studies. The training must either be a <u>required</u> part OR an <u>integral part</u> of the established curriculum and the student must receive <u>academic credit</u> for the employment. As an academic course, the period of employment should normally fall within the limits of a given academic term. Employment may be either full-time (over 20 hours a week) or part-time (20 hours or less a week). However, if 12 months of <u>full-time</u> CPT is used then <u>no</u> Optional Practical Training (OPT) is permitted at that degree level. Part-time CPT or less that 12 months of full time CPT will not impact the OPT period.

Students participating in CPT during a fall or spring semester must continue to pursue a full course of study. <u>Both failure to enroll in the specific course for which the CPT is approved and to complete</u> the employment during the period of authorization will result in a violation of immigration status.

**ELIGIBILITY:** Students are eligible for Curricular Practical Training after they have completed two full semesters (fall and spring) in valid F-1 status (including enrolling full-time each semester and possessing a valid I-20). Time spent on an approved full-time study abroad program may be counted toward the two-semester requirement as long as the student has completed one semester in the U.S. before studying abroad. However, students that have finished all course requirements except for thesis, dissertation or equivalent may only participate in CPT if the employment is necessary to obtain data from the employment that will be published in and significantly contribute to the thesis, dissertation or equivalent.

**AUTHORIZATION:** CPT is authorized by an international student advisor in the International Student Services Office (ISS). Employment may not begin until the proper authorization is obtained on page 3 of the student's I-20 and must end by the authorized completion date.

**FORMS:** Refer to Curricular Practical Training (CPT) checklist for forms and documents needed to apply for CPT employment authorization.

#### **HOW TO APPLY:** Complete Section A of the **Curricular Practical Training Academic Advisor Recommendation Form**.

- 1. Have your academic advisor complete Section B and write a letter outlining how the course objectives and/or academic major directly relate to the internship experience being offered to the student in their internship/employment site letter.
- 2. Secure a letter from proposed internship/employment site outlining the specific skills and objectives the student will be responsible for during their internship/employment experience. The letter should be on company letterhead, include the start and end date, number of hours per week, pay if any, location of internship/employment and that the internship is for student training purposes and the site does not gain any immediate advantage from the internship.
- 3. Student should prepare a letter outlining how and why the internship/employment experience directly relates to the academic course(s) enrolled in and academic major.
- 4. Schedule an appointment with an international student advisor in ISS. Take to the appointment your: (1) completed Curricular Practical Training Academic Advisor Recommendation Form and letter, (2) letter from internship/employment site (3) current I-20, I-94 and passport.
- 5. The ISS advisor will verify your F-1 status and review the CPT Academic Advisor Recommendation Form & letter, and letter from internship/employment site to confirm that the employment meets the curricular requirements. If the ISS approves the CPT, the authorization will be submitted to SEVIS, which will result in the issuance of a new I-20 showing that you are authorized for this employment.
- 6. You will receive an e-mail informing you that your new I-20 authorizing the CPT is ready for you to pick up in the ISS office. Be sure to sign the Student Certification (I-20 Section #11) and let ISS make a photocopy for your student file.
- 7. Employment may begin only after the ISS advisor has authorized the CPT by endorsing your I-20. **The I-20 is the official document authorizing the Curricular Practical Training employment.**

Reference: 8 CFR 214.2 (f) (10)(i)

## F-1 CURRICULAR PRACTICAL TRAINING ACADEMIC ADVISOR RECOMMENDATION FORM

#### **SECTION A: To be completed by <u>student</u>:**Name exactly as it appears in passport:

|    | Family/surname   |                 |                           | Middle name, if applicable          |  |  |  |  |
|----|--|-----------------|---------------------------|-------------------------------------|--|--|--|--|
| 2. | 3  | E-Mail          | 4                         | Phone Number(s) and Type            |  |  |  |  |
| C  | ΓΙΟΝ Β: Recomm   | nendation to be | completed                 | by <u>Academic</u> <u>Advisor</u> : |  |  |  |  |
| 1. | Educational level (ched  | ck one): Bach   | nelor Ma                  | aster                               |  |  |  |  |
| 2. | Major area of study  |                 |                           |                                     |  |  |  |  |
| 3. | <b>Term</b> in which <b>ALL</b> degree requirements are anticipated to be completed:   |                 |                           |                                     |  |  |  |  |
|    |  | •               | •                         | [ ] Summer 20                       |  |  |  |  |
|    | [ ] Within the initial v   | veek(s) of      | term 20                   | before enrollment is required       |  |  |  |  |
| 4. | Name of proposed emp   | •               |                           |                                     |  |  |  |  |
| 5. | FULL Address of empl   | oyment          |                           |                                     |  |  |  |  |
|    | (include street/city/state/  |                 |                           |                                     |  |  |  |  |
| 6. | Proposed employment  | start date      | end date                  | e(month/day/yea                     |  |  |  |  |
| 7. | Proposed number of hours to work per week  |                 |                           |                                     |  |  |  |  |
| 8. | Academic credit will be awarded as follows:  |                 |                           |                                     |  |  |  |  |
|    | Course number  | Course ti       | tle                       |                                     |  |  |  |  |
|    | Number of credit hours   | s Semester      | & year credit w           | vill be awarded                     |  |  |  |  |
|    | [Both failure to enroll in the specific course for which the CPT is approved and to complete the employment during the period of authorization will result in a violation of immigration status.]  |                 |                           |                                     |  |  |  |  |
|    | CHECK ONE:   |                 |                           |                                     |  |  |  |  |
|    | I hereby have reviewed and recommend the above-mentioned student for Curricular Practical Training employment. The attached letter outlines and verifies how the course objectives and/or academic major directly relate to the internship/work experience being offered to the student in their internship/employment site letter.  Academic advisor's signature: |                 |                           |                                     |  |  |  |  |
|    | Academic advisor's sid   | nature:         | Name printed: Department: |                                     |  |  |  |  |
|    |  |                 |                           |                                     |  |  |  |  |

# F-1 CURRICULAR PRACTICAL TRAINING Check list

| 1       |   |  |        |                            |  |  |  |
|---------|---|--|--------|----------------------------|--|--|--|
| _       | Family/surname  | Given name   |        | Middle name, if applicable |  |  |  |
| 2       | 3   |  | 4      | Cell Phone Number          |  |  |  |
|         | FHSU ID#  | E-Mail   |        | Cell Phone Number          |  |  |  |
|         |   |  |        |                            |  |  |  |
|         | Have you applied for/or requested Curricular Practical Training for a previous semester(s)?   |  |        |                            |  |  |  |
|         | Yes No<br>If yes, list previous CPT request and approved dates.   |  |        |                            |  |  |  |
|         |   |  |        |                            |  |  |  |
|         | F-1 Curricular Practical Training Academic Advisor Recommendation Form  |  |        |                            |  |  |  |
|         |   | Tournealar Fractical Fraining Academic Advisor Recommendation Form                 |        |                            |  |  |  |
|         |   | ectives and/or academic major directly he student in their internship site letter. |        |                            |  |  |  |
|         | Letter from proposed internship site outlining the specific skills and objectives the student will be responsible for during their internship/employment experience. Letter should be and original letter with signature on company letterhead, include the start and end date of internship/employment, number of hours per week, location of internship/employment and that the internship/employment is in the student's major area and for student training purposes. |  |        |                            |  |  |  |
|         | Letter from student outlining how and why the internship/employment experience directly relates to the academic course(s) enrolled in and the academic major for the requested CPT time.  |  |        |                            |  |  |  |
|         | Curricular Practical Training   |  |        |                            |  |  |  |
|         | Please check if CPT   | is: Paid   | Unpaid | i                          |  |  |  |
|         |   |  |        |                            |  |  |  |
| For Of  | fice Use Only:  |  |        |                            |  |  |  |
| Appro   | ved:  |  |        |                            |  |  |  |
| Dates o | of CPT endorsement:_  |  |        |                            |  |  |  |
| Denie   | d:  |  |        |                            |  |  |  |
|         |   |  |        |                            |  |  |  |
|         |   |  |        |                            |  |  |  |
|         |   |  |        |                            |  |  |  |