

ACADEMIC ADVISOR'S RECOMMENDATION FORM FOR CURRICULAR PRACTICAL TRAINING

The information requested is needed to comply with US Citizenship and Immigration Services (CIS) regulations. The international student named below is applying for Curricular Practical Training (CPT). CPT is defined as paid Employment that is directly related to and an integral part of, the established curriculum of your school. This employment is required for degree completion, such as the internships required for programs in the areas of Automotive Technical Services, Health Information Technology, and Emergency Medical Technician-Paramedic. **An internship must be part of a required course in the regular curriculum (listed as a course offering in your school's catalog or bulletin).**

Section #1 - Student completes this section:

Student Name: _____
(Please print) *last, first, middle*

Social Security Number: _____ Academic Major: _____

E-Mail _____ Phone: _____

Current (Local) Address:

Permanent Address in Home Country:

Previous Periods of Practical Training:

<i>Curricular Practical Training</i>	<i>Dates of CPT</i>	<i>Optional Practical Training</i>	<i>Dates of OPT</i>

Dates of Proposed Curricular Practical Training: Starting

Date: _____ Ending Date: _____

(These date should come from the employer's offer letter)

This training will be: ____ Full Time ____ Part Time (20 hrs/wk or less)

Name of Employer:

Complete Mailing Address of Employer:

Please provide a brief description of your duties:

Section #2 – To be completed by the Student's Academic Advisor or Department Chairperson:

The student named above, will complete all requirements for:

(Check one) ____ Associate's ____ Certificate

I anticipate that this student's Program of Study will be complete, when official degree certification is completed at the conclusion of the: Fall 20____ or Spring 20____ semester.

Or, if the student will complete degree requirements mid-semester, please indicate the date to be used:

*** Please note the date of completion cannot be any later than the degree conferral date for that semester.**

Please provide a brief explanation why this particular curricular practical training experience is integral to the student's academic program. How will this experience enhance his or her studies? (This information will be entered into the student's SEVIS record.)

Section #3 – To be completed by the Student's Academic Advisor or Department Chairperson:

I certify that the curricular practical training experience, described above and in the employer's offer letter, is recommended for this student. I further certify that the curricular practical training is an integral part of an established curriculum.

Advisor's Signature

Name & Title (please print)

Department (please print)

Telephone #

Section #4 - For OISS Use Only

OISS Action & Date: _____ Initials: _____

Entered in SEVIS (Date & Initials): _____ Student notified via e-mail (date): _____

Please return this form and any other necessary documentation to the Office of International Student Services, located on the second floor of the Campus Center.