



Curricular Practical Training Application

Curricular Practical Training (CPT): must be “an integral part of an established curriculum.” Federal regulations define it as "alternate work/study, internship, co-operative education, or any other type of required internship or practicum which is offered by sponsoring employers through cooperative agreements with the school."

To be eligible for Curricular Practical Training:

- Must be in valid F-1 status at the time of application and have been in full-time status for one academic year preceding the CPT application. Graduate students whose degree requires immediate participation in CPT may apply after arriving in the U.S. and registering at CIS.
- The work must be required by the degree program or earn credit towards the degree program.
- **IMPORTANT: Must be authorized for CPT before beginning employment. Working off-campus without prior authorization is a violation of F-1 status.**

How to Apply:

1. Submit the following documents **prior to the start of the CPT:**
 - Completed CPT request form (this form, both sides)
 - Letter (on letterhead) from the employer. Letter must include:
 - Name, address, and contact information of employer/site supervisor
 - Description of work to be performed
 - Beginning AND ending dates of employment/appointment (position can be paid or unpaid)
 - Number of hours to be worked per week
(Part time CPT = 20 hours or less per week; Full time CPT = more than 20 hours per week)
 - For full-time CPT an [RCL form](#) is also required
2. **Must register for at least one credit related to the CPT for each semester (including summer) for which the CPT is authorized.**

To be completed by student:

Last Name: _____ First Name: _____

Student ID # _____ Email: _____

Undergraduate _____ Graduate _____ Major: _____

Expected degree completion date (expected): _____ I will work _____ hours per week

Dates of planned internship: _____ to _____ Position Title: _____

Name of Employer/Volunteer Site of Internship: _____

Address of Internship Site: _____

Street
Suite/Department

City
State
Zip Code

By signing below, I verify my eligibility for CPT authorization, that the internship/practicum is integral to my program of study, and that I understand that working without authorization constitutes illegal employment and will result in the termination of my F-1 status.

(Student Signature)

(Date Signed)

CPT ELIGIBILITY VERIFICATION FORM

To be completed by the Departmental Internship Director:

Your verification of the student's eligibility for CPT is required to insure that we are in compliance with federal regulations. If you have questions, please call the Center for International Studies. Check the appropriate item for the student's proposal:

- _____ 1. Program Requirement:
The student is required to engage in the proposed internship by his/her degree program. This requirement is published in the SCSU Undergraduate or Graduate Bulletin.
- _____ 2. Alternate Course Major Requirement:
The proposed internship is an *alternate requirement* of the degree program (listed in the bulletin) or alternate course project (listed on the syllabus). This course must be listed in the SCSU Undergraduate or Graduate Bulletin.
Graduate Students only:
Culminating project requires internship/fieldwork experience (included in proposal)
- _____ 3. Cooperative Education Requirements:
The proposed internship is facilitated through a cooperative education agreement/contract between SCSU and the proposed employer; and is an integral part of the degree program.
- _____ 4. Optional Independent Study:
The experience to be gained from the internship is viewed by the student's major department to be integral to the student's degree program. **A letter from the student's academic advisor or department chair must accompany this form if this option is checked.** The letter must explain how the internship will not prevent the student from making normal academic progress (i.e., will not delay graduation).

Student must enroll in **at least one credit** related to CPT for each semester (including summer) which CPT is authorized. If CPT is requested for multiple semesters provide course enrollment/number of credits for each semester.

Semester _____	Course title and number: _____	Number of credits: _____
Semester _____	Course title and number: _____	Number of credits: _____
Semester _____	Course title and number: _____	Number of credits: _____
Semester _____	Course title and number: _____	Number of credits: _____

For immigration purposes, full-time CPT (more than 20 hours/week) constitutes a full course of study and therefore students are not required to maintain full-time enrollment (12 credits for undergraduate students, 8 credits for graduate students). Academic department policies may vary. **Students will need to complete a separate RCL form for full-time CPT.**

By signing below, I indicate that I have read and reviewed the information provided by the student as it relates to his/her eligibility for Curricular Practical Training, and I certify that the aforementioned information is true and correct to the best of my knowledge.

(Signature of Departmental Internship Director)

(Date Signed)

(Name – Please Print)

(Phone)

(Academic Department)