

Curricular Practical Training Academic Advisor Recommendation

Curricular practical training is defined to be alternate work/study, internship, cooperative education, or any other type of required internship or practicum which is offered by sponsoring employers through cooperative agreements with the school. Students who have received one year or more of full-time curricular practical training are ineligible for post-completion optional practical training. Exceptions to the nine-month in status requirement are provided for students enrolled in graduate studies which require immediate participation in curricular practical training. All parties must understand that the internship is an integral part of the curriculum.

Section A (To be completed by student):

First Name: _____ Last Name: _____ ID#: _____ - _____ - _____
Phone#: _____ E-mail: _____ Major: _____

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Section B (To be completed by Academic Advisor): Curricular Practical Training Proposal/Recommendation

Is this practicum/internship an integral part of the student's established curriculum for the student's program of study? Yes No

Employer's Name: _____ Employer's address (city & state): _____

Employment Start Date: ____/____/____ to End Date: ____/____/____

How many hours will the student work per week? _____

(Must enroll as a full-time student if participating in part-time CPT; may enroll as a part-time student in participating in full-time CPT)

How many credit hours will be awarded per semester(s): _____

Course number: _____ Course title: _____

(The student must be enrolled in the course listed above for each semester of CPT participation in order to maintain his or her F-1 visa status)

If this practicum is not defined in the course catalog, please provide an explanation on how this employment experience is an integral part of the student's establish curriculum:

I hereby recommend that the student named above participate in the employment described on this form.

Faculty advisor's signature: _____ Date: ____/____/____

Print name: _____ Department: _____

Phone: _____ E-Mail: _____