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## CURRICULAR PRACTICAL TRAINING (CPT) Academic Advisor Recommendation Off-Campus Employment Authorization for F-1 Students

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**To be completed by the student:**

Name: \_\_\_\_\_ Student Number: \_\_\_\_\_

Local phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Academic Department: \_\_\_\_\_ Degree Level: Bachelor Master Doctorate

*Prospective Employer Name and Address:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Proposed Dates of Employment:*

Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

**\*Written authorization for employment based on Curricular Practical Training must be received prior to beginning employment. Working without employment authorization is a violation of visa status and results in a student losing legal status in the United States.**

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**To be completed by the Academic Advisor or Faculty**

PLEASE NOTE: In order for a student to be eligible for Curricular Practical Training, **the employment must be mandatory for a course** that is offered in a student's major field of study, be listed in the bulletin of course offerings, and have a faculty member assigned to teach the course.

In what course will the student enroll to earn academic credit for the work experience? (please answer all questions)

**Course Name** \_\_\_\_\_ **Course Number** \_\_\_\_\_

**Number of Credit Hours Assigned to Course** \_\_\_\_\_ **Instructor** \_\_\_\_\_

**Is the course above required or optional for the student's course of study?** \_\_\_\_\_

**Is the course above an integral part of the student's course of study?** \_\_\_\_\_

Semester student will be enrolled in this course (Enrollment must be concurrent with employment)

**Fall 20**\_\_ **Spring 20**\_\_ **Summer 20**\_\_

How will this employment fulfill the course requirement?

\_\_\_\_\_  
\_\_\_\_\_

**I RECOMMEND THAT THIS STUDENT BE GRANTED AUTHORIZATION FOR CPT.**

Advisor Name: \_\_\_\_\_ Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_