



CURRICULAR PRACTICAL TRAINING (CPT)

WORK/LEARNING AGREEMENT (WLA) THROUGH A REQUIRED COURSE

PRIOR TO COMPLETION OF STUDIES IN A DEGREE PROGRAM Pursuant to 8 CFR 214.2 (f) (10) (i)

Curricular practical training may be available to a student who has been in a *bona-fide* (i.e. "good and true") **F-1 status** for **eight (8) consecutive months** (2 full terms), is currently **enrolled full time**, and is in **good academic standing**. We encourage our students to gain practical experience, however this practical training must be **employment directly related to the F-1's major field of study** and considered **an integral part of the student's curriculum**. Thus this work experience must be associated with a specific class in which the F-1 student is enrolled.

CPT Procedure:

1. **Attend** an "Off Campus Employment" seminar offered by the Office Of International Students
2. **Determine** whether your CPT will be authorized through the OIS WLA or through Career Services Cooperative Education option.
3. If using the OIS WLA, **complete** this form ... If using Career Services Cooperative Education, follow their procedure (located in McKenny Hall)
4. Make an **appointment** with an International Student Advisor for SEVIS approval and to get a new I-20 with the work authorization. Bring:
 - a. the **completed** CPT agreement form
 - b. an employment **offer** letter (or this completed form)
 - c. proof of **enrollment** in the referenced course
5. **Submit** a completed **Evaluation** form to OIS at the end of the authorized CPT – *no additional periods will be approved unless this evaluation form is submitted!*

| | | |
|--------------------|-------------------|-----------------------------|
| Student First Name | Student Last Name | E00 _____ |
| Email Address | 1 (____) _____ | (Area Code)Telephone Number |

INTERNATIONAL STUDENT ADVISOR CERTIFICATION: This student is eligible to apply for CPT _____, DSO

OFFER of EMPLOYMENT: please complete this section or attach a letter which includes the following information:

| | | |
|---|----------------------------|--|
| Company Name | Supervisor Name | 1 (____) _____ (Area Code)Telephone Number |
| Street Address | City | State |
| Employment Start Date: _____ | Employment End Date: _____ | Zip code |
| | | Wage rate: \$_____ per _____ for _____ hours per week |
| The duties and responsibilities will include: _____ | | |
| Print Name | Signature | Date |

PROFESSOR CERTIFICATION: Please confirm:

This student is **majoring** in _____ and the job described above is directly related to their program of study. While CPT may be mandatory or elective, the class referenced for this CPT is in a current term with course description and faculty listed. This employment partially fulfills requirements for **course** _____ and the evaluation form must be submitted upon completion of the CPT.

If the student wishes to extend their CPT employment, I (would / would not) consider giving a grade of INCOMPLETE at the end of this term.

Professor/Advisor Name _____ Signature _____ Date _____