

Western Carolina University
INTERNATIONAL PROGRAMS & SERVICES (IPS)
Curricular Practical Training (CPT)
APPLICATION FORM

Instructions: Complete both sides and submit this form to IPS if you are an F-1 student requesting authorization for CPT. This training allows you to accept employment in your field of study that is “integral to the established curriculum” of your degree program. This means that the employment is not only related to the field of study, but also necessary for academic course credit.

FOR-CREDIT CURRICULAR PRACTICAL TRAINING

A. To be completed by the STUDENT (Please print clearly)

IPS permits employment for required **credit-bearing training programs**, *only if* certain conditions are met. To satisfy one of the two conditions below, please check only one:

1. The training is a mandatory requirement to complete graduation requirements
 2. The training is an integral part of student’s academic program of study, for which student will receive course credits
- (If neither above applies to you, you will not be permitted to apply for CPT and OPT will be only option)

Name: _____

920# _____

MAJOR: _____ DEGREE LEVEL: _____

of credits obtained / remaining to graduate: _____/_____

Expected Date of Completion: _____

E-Mail: _____

Your signature Date

2. Attach job offer letter to this form which specifies: duties, beginning and ending dates, Full or Part time, Hrs. per week and employment site (Be sure to show letter to academic advisor for approval)

I am requesting: Full time CPT (More than 20 hrs. per week)
 Part time CPT (20 hrs. per week or less)

Employer: _____

Location: _____

Duties: _____

Start date: ____/____/____ End date: ____/____/____

Course name and #: _____ Credit(s) given: _____

Name of faculty member supervising this course: _____

• (An independent study course cannot be used to qualify for CPT, as such courses are intentionally designed to allow a student and faculty member to write whatever description they may wish. In order to qualify for CPT, the course listed in the department/program curriculum already must be designed specifically as an internship/training opportunity).

B. ACADEMIC ADVISOR CERTIFICATION: Please review the proposed employment letter presented to you by the student. If the employment satisfies the requirements for one of the conditions stated on the previous, please complete the form below.

As the academic advisor for _____, I certify that the information provided on this form is true and accurate and that this CPT is not for the primary purpose of only facilitating employment authorization. I recommend that CPT be approved.

1. I verify that the student is currently in good academic standing and is making progress toward completion of his/her degree.
2. I verify that I have reviewed the proposed employment and meets one the following requirements:

_____ Internship only as integral part of program authorized for _____ credit(s) for the following term(s):

() fall _____ () spring _____ () summer _____

_____ Internship requirement for all candidates to complete the program

Comments:

WCU DEPARTMENT: _____

Faculty Name

Signature

DATE

PHONE

E-mail

For International Programs & Services Office Use Only

Approved

Comments: _____

Denied