Curricular Practical Training & Authorization Request Form

Eligibility
To be eligible for Curricular Practical Training (CPT) you must:
- Be an F-1 student
- Have completed an academic year (a fall and a spring semester).
- Have been full-time every fall and spring semester at Becker College
  - Undergraduates must complete 12 credit hours

Definition
CPT is authorization to be employed in training off-campus “which is an integral part of an established curriculum and is directly related to the student’s major area of study.” You must be enrolled for a course that requires work experience. All students must take and complete the course for which CPT employment authorization was granted.

Examples
Examples that meet the CPT definition include externships, internships or practicums, offered through a department at Becker. Please check with your academic advisor to see if your department offers any of these possibilities.

Authorization
International Student Services (ISS) authorizes CPT after verification that a student meets the eligibility requirements for CPT, has a job offer, and has enrolled in a class requiring employment. ISS gives the authorization on the I-20 Employment page; no Employment Authorization Document from the U.S. Citizenship & Immigration Services is required.

Requesting Changes after CPT Authorized
CPT is approved for a specific employer, place of employment and time period. You must request any changes two weeks before the new employer, place and/or time period may begin (completing new forms and obtaining new authorization).

Effect on Optional Practical Training (OPT)
Please note that F-1 students with 12 months or more of full-time CPT are not eligible for Optional Practical Training (OPT).

Application Process
- Print the Curricular Practical Training form
- Fill out the top portion ONLY. Your academic advisor is responsible for filling out the bottom portion of the form.
- Bring the completed form, along with your work contract/job offer letter to the ISS no later than three (3) business days before your employment begins.
  - DO NOT WORK WITHOUT PROPER AUTHORIZATION. Working without CPT authorization is illegal and is grounds for automatic termination from the program.
  - You will be emailed when your new I-20 listing your CPT authorization is ready.
  - Do not continue employment beyond the date authorized on your I-20.
To the student: to receive employment authorization return this completed form to the International Student Advisor (ISA), along with a job/contract offer letter if possible. Please allow 1 – 3 business days for processing. You will be notified by email when your CPT I-20 is ready. You must have the authorization in-hand to begin employment. Please do not work without prior authorization. Please review the CPT regulations and instructions prior to submitting this request to determine eligibility.

Guidance for Academic Advisor:

Definitions & types of CPT: The U.S. Citizenship & Immigration Services (USCIS) defines “Curricular Practical Training” as employment which is an integral or important part of a student's curriculum. There are two categories of CPT. The first is training which is a required part of the curriculum and can be done at any time during a student’s enrollment. The second category is training which is not a degree requirement but for which a student receives academic credit (optional Curricular Practical Training).

Requirements & Guidelines: A student must be in valid F-1 status for one academic year before engaging in optional Curricular Practical Training. Students in this category must earn credits for their involvement in CPT and the CPT cannot affect their ability to complete their program on time. Students on academic probation cannot be authorized for CPT as they must be making satisfactory academic progress at all times.

Description of the Proposed Training (to be completed by the student)

Name of Company: _______________________________________________________________________________________________________

Address of Company: _______________________________________________________________________________________________________

Job Title: ____________________________________________________________________________________________________________

NUMBER OF HOURS PER WEEK

__Part-time (20 hours per week or less)
__Full-time (more than 20 hours per week) May only be full-time during the winter or summer break, or if the student is attending part time in his/her last semester. If it is the student’s last semester, please initial here ______.

BEGINNING DATE: _______________________ ENDING DATE: _______________________

(mm/dd/yy)                                                                                     (mm/dd/yy)

Academic Advisor’s Endorsement (to be completed by the academic advisor)

I have reviewed the above named student’s offer of employment and have determined that it meets the guidelines for Curricular Practical Training as follows:

Student Progress Verification

☐ The student is currently making good academic progress and is not on academic probation
☐ The requested CPT will in no way affect the student’s ability to complete his/her course of study as intended.

Credit Enrollment Information

☐ The proposed employment fulfills the following degree requirement ________________________________

Advisor’s Name (please print)  Signature  Date
Curricular Practical Training
Student Acknowledgement

To the Student: Please check that all the information on the CPT Authorization Form is complete and accurate, then read the following carefully and sign the bottom to acknowledge that you understand the rules and procedures regarding Curricular Practical Training employment authorization.

1. Employment Requirement: I understand that CPT will be authorized for employment only if it is an integral or important part of your curriculum.

2. Eligibility: I am eligible for CPT because I have been lawfully enrolled on a full-time basis in a degree program for at least one full academic year.

3. Part-time versus Full-time CPT: I understand that if I become authorized for part-time CPT, I may not work more than 20 hours per week in my CPT job and that if I do so I will be in violation of my F-1 immigration status. However, if I am authorized for full-time CPT, I may work unlimited hours for the CPT employer.

4. Effect on OPT: I understand that if I become authorized for more than an aggregate of 12 months of full-time CPT, I will lose eligibility for Optional Practical Training authorization.

5. Course Registration Requirement: I understand that if the employment is part of a course, I must remain registered for the entire semester for which the CPT will take place. I also understand that I am required to register for a full-time credit load (12 credits or more) if I engage in part-time CPT during the fall or spring semester. If I engage in full-time CPT during the fall or spring semester, I am not required to enroll in other courses, but I must be registered as “certified full-time student” by my academic department at Becker College.

6. Working without Authorization: I understand that I may not lawfully begin employment until the ISA has granted Curricular Practical Training employment authorization. To do so constitutes a serious violation of my immigration status.

7. Authorization is Employer and Date Specific: I understand that CPT is authorized for a specific employer and that I may not work for any other employer during this period without additional CPT authorization from the ISA. I also understand that the authorization is date specific and that I may not begin work until the start date of the CPT authorization and I must stop working on or before the end date of the authorization.

Acknowledgment: I have reviewed the information on the CPT Authorization Form and it is complete and accurate. I have also read all the information on this page and acknowledge that I understand it and will abide by the rules and procedures outlined here. I am submitting this form to the ISA as a formal request for Curricular Practical Training authorization.

_________________________________________________________________________________  __________________________________________
Student’s Signature Date

___________________________________________________________________  __________________
Printed Name