WILLIAM PATERSON UNIVERSITY
Office for International Students and Scholars • Morrison Hall, G-03
300 Pompton Road • Wayne, New Jersey 07470-2103
973.720.2976 • Fax 973.720.2336 • wpunj.edu

F-1 Curricular Practical Training (CPT) Department Form

Purpose of Form: This form must be completed by the academic department of any F-1 student requesting CPT authorization. Please complete this entire form and submit it either to the student or Office of International Students & Scholars.

What is Curricular Practical Training (CPT)? CPT is authorization for international students to receive further training that is directly related to their degree level and major. Federal regulations permit F-1 students to engage in CPT that is an integral part or planned option in the student's degree plan. CPT includes internships, clinicals, student teaching, or off campus training. CPT authorization is dependent upon the student being academically eligible and the employment meeting federal government regulations. F-1 students must apply for CPT if they intend to work off-campus as an integral part of planned option of their established curriculum prior to completion of their academic program, whether or not they will receive any form of payment or compensation. Students completing an internship on-campus must also apply for CPT. A student authorized for CPT may only be employed by a specific employer, at a specific location and for specific dates, as approved by the International Office. Any changes in the employment (i.e. employer, location, dates of employment) require a new CPT application. **The student cannot begin CPT until the authorization is noted on their I-20.**

F-1 students MUST be granted CPT authorization on their I-20 before beginning CPT.

Student Last Name: _____ First Name: _____

Student ID: 855_____

Employer Name: _____ Student's Job Title: _____

Requested CPT Start Date: _____ Requested CPT End Date: _____

Student's expected date of graduation: Month _____ Year _____

List all course(s) for which the student will be receiving credit for CPT:

Course Name: _____ Course Number: _____ Number of Credits: _____

Academic Department's Statements of Understanding:

I certify that this internship/off campus training experience (including clinicals or student teaching) is directly related to the student's major and degree level and ONE of the following:

- A mandatory requirement for all degree candidates in our program that cannot be waived
- Required as an integral part of the established curriculum (the course is on the approved degree plan)
- Required as part of the research for thesis or dissertation (graduate students only)

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Has the academic advisor met with the student to establish specific course objectives that the student will be expected to achieve during the training? [ ] Yes or [ ] No
Is there an agreement (i.e. understanding) between the academic department and the employer about the goals to be achieved and the duties to be performed during the CPT experience? [ ] Yes or [ ] No

- I have the authority to verify this information.
- I certify that the information provided on this form is true and accurate.
- I understand that the information on this form will be reported to the U.S. Department of Homeland Security (DHS).
- I understand that CPT is designed to provide practical training and is not a mechanism for the student to simply work off-campus and/or earn money.
- I understand that failure to adhere to the DHS CPT requirements could result in the student violating federal regulations and could jeopardize our ability to host international students at WPU.

My signature confirms that I have read and understand the Statements of Understanding listed above.

Academic Advisor, Department Chair, or Dean

Name: _____ Signature: _____

Date: _____

An official job offer letter on company letterhead OR a copy of an official agreement between WPU and the employer must be provided to OISS. The employer letter MUST contain the following:

1. A brief statement of the job assignment
2. The beginning and ending dates of employment (student cannot participate outside of these dates)
3. The number of working hours per week
4. The location of employment (street address, city, state, and zip code)