



F-1 Curricular Practical Training

Curricular Practical Training (CPT) for F-1 students is intended to provide hands-on practical experience in situations that serve as an integral part of a student's academic program. Students who have been in F-1 status for at least nine months may apply to participate in this type of training. Proper registration must be maintained at all times and CPT may only be requested prior to the completion of a student's academic degree requirements.

In order to be eligible for CPT, one of the following academic objectives must be met:

1. The experience must be required to complete graduation requirements.
- OR
2. The experience is through an institutionally-sponsored experiential learning program such as cooperative education or practicum.

NOTE: Students who have received one year or more of *full-time* CPT during their program are INELIGIBLE for post-completion optional practical training (OPT). *Part-time* CPT will not affect OPT eligibility.

Application Procedure

**** All CPT applications must be submitted at least 3, but preferably 5, business days in advance of the intended start date, otherwise ISS cannot guarantee that authorization will be completed in time. ****

1. Complete the Data Sheet with an Experiential Learning Specialists or Academic Authority and bring it to the Office of International Student Services (ISS) with proof of registration printed from SIS.
 - * CPT CANNOT be authorized retroactively (if the requested start date has already passed).
 - * Requested authorization dates may fall between the first day of the current semester and the last day of finals for that semester. Questions or concerns about these dates should be discussed with an advisor in ISS PRIOR to submitting CPT materials.
 - * If the employment is NOT through an institutionally-sponsored cooperative education or practicum program, then a letter from the academic authority/advisor is REQUIRED. The letter must explain how the experience is directly related to the student's program of study and why it is integral to the completion of graduation requirements. Advisors are encouraged to contact ISS with questions about the contents of this letter.
2. Bring an offer letter, printed on the employer's letterhead stationery, stating the location of the job, the number of hours worked per week, and an appropriate start and end date for the practical experience.
 - * CPT WILL NOT be authorized if the start and end dates written in the offer letter are not specific in MM/DD/YY format and do not exactly match the dates provided on the Data Sheet. These dates must coincide with the university's academic calendar as described above.
 - * If stationery includes an employer's address, but the student will be working at a different location, the site of activity must be included in the offer letter's text. This information is required to generate an I-20.
3. A new I-20 listing the employer's information and dates of CPT authorization will be provided to the student. A copy of the new I-20 must be provided to the employer as proof of authorization and eligibility to work.
 - * STUDENTS MUST BE IN POSSESSION OF THE NEW I-20 PRIOR TO ENGAGING IN PRACTICAL TRAINING.
 - * STUDENTS MAY ONLY PARTICIPATE IN TRAINING AFTER RECEIVING THE NEW I-20 AND DURING THE SPECIFIC AUTHORIZATION PERIOD PRINTED ON THE DOCUMENT.
 - * FAILURE TO COMPLY WITH BOTH CONDITIONS IS ILLEGAL AND A VIOLATION OF F-1 VISA STATUS, THE RESULTS OF WHICH COULD BE THE TERMINATION OF STATUS.

For more information, contact an ISS advisor at (216) 368-2517.



Terms and Conditions

I, _____, have read page 1 of the F-1 Curricular Practical Training (CPT) packet and fully understand the terms for qualifying, applying, and maintaining my CPT.

Student's Full Name

By signing below, I acknowledge that I have received this information and read all of it. I understand and agree to abide by it; all of the information as submitted on my application is true and correct.

Signature of Student: _____ *Date:* _____

By initialing below I also acknowledge that I have read and fully understand the additional information and explanations as listed. If I fail to complete this section of the application, I understand that I will not be authorized for CPT.

Rules and Policies

Initial here

I understand that my CPT is fulfilling one of the academic objectives listed on page 1 and I will not be eligible for Optional Practical Training (OPT) if I am authorized for 12 or more months of *full-time (more than 20 hours per week)* CPT throughout the course of my program.

I understand that I must submit all application materials to ISS no less than 3 business days in advance of my intended start date. If I do not submit application materials during that time, I understand that ISS may not be able to process my authorization in time and my CPT authorization will not be retroactive.

I understand that CPT is employer, location, and time specific, meaning that I may only work for a specific employer at a specific location during the time frame explicitly listed, and that it is illegal for me to begin/continue working before I receive an I-20 with proper CPT authorization from ISS. The I-20, no other documentation, determines for whom I may work and for what period of time.

I understand that during the academic year (Fall and Spring semester) I am only permitted to work for a total of 20 hours per week and that this regulation is applicable to the work I do while authorized for on-campus employment and CPT authorization. The only time that I may work for more than 20 hours per week is during the summer and I know that I must first have proper authorization from ISS. Students authorized for CPT based on Co-Op or Practicum registration During the academic year should discuss weekly work hours with an ISS advisor.

If I plan to work for multiple employers, I understand that I can never work more than a cumulative total of 20 hours per week during the Fall and Spring semesters. During the summer, I understand that I must discuss my plans to work for multiple employers with ISS and the experiential learning specialist/academic authority to determine my eligibility. I understand that it may be necessary to make adjustments or cancel previously authorized work permissions and that I may have to complete additional paperwork and/or ask my employers for additional materials to ensure that I comply with these regulations.

I understand that there are very serious consequences for my actions and that my visa status could be terminated if ISS determines that I have violated the regulations regarding CPT or other work. I understand that CPT is a benefit, not a right, and that it is my responsibility as an F-1 student to remain in compliance at all times.



Curricular Practical Training Data Sheet

To be completed by the Student after reviewing "F-1 Curricular Practical Training" and completing "Terms and Conditions" sections.

Student's Surname/Primary Name, Given Name (as it appears on the I-20)

Program of Study

Student's Email Address

Is this a paid experience?

☐

Yes

☐

No

Do you already have an SSN?

☐

Yes

☐

No

To be completed by Experiential Learning Specialist or Academic Authority
after reviewing "F-1 Curricular Practical Training" section.

Name: Experiential Learning Specialist or Academic Authority

Will the student be graduating at the end of this semester? ☐ Yes ☐ No

I have met with the student listed above and recommend that curricular practical training at:
(please print company name and complete address)

be authorized from _____ to _____
(Student must reapply if additional time is recommended)

based on the following academic objective (check only one):

_____ The experience is required to complete graduation requirements.

_____ The experience is through an institutionally-sponsored experiential learning program such as cooperative education or practicum.

This position will be: _____ part-time (≤ 20 hours / week) _____ full-time (> 20 hours / week).

Signature of Experiential Learning Specialists or Academic Authority

Date

Department

Email

Student's Checklist

- ☐ Completed and Signed CPT Data Sheet
- ☐ Initialed and Signed Terms and Conditions Form
- ☐ Proof of proper registration from SIS for the current semester
- ☐ Letter of Employment
- ☐ Letter from Faculty Advisor / Department Chair (if applicable)

ISS USE ONLY: CPT Authorized by: _____ Date: _____

