



OFFICE OF INTERNATIONAL STUDENT AND SCHOLAR SERVICES

Eastern Kentucky University

521 Lancaster Avenue Richmond, KY 40475

Phone: 859-622-3446

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https://www.eku.edu/international-student-and-scholar-services/

CURRICULAR PRACTICAL TRAINING (CPT) REQUEST FORM

PART I: TO BE COMPLETED BY STUDENT

All international students wishing to engage in off-campus practical training (including, co-op, practicum etc.) whether paid or unpaid must complete this form to obtain authorization from the Office of International Student and Scholar Services. **CPT is authorized one semester at a time. A new request must be submitted each semester for any additional CPT authorization.**

Student & Program Information

Last Name: _____ First Name: _____

EKU ID#: _____ Immigration Status: F-1 J-1 Other _____

Degree Level: Graduate Undergraduate Major: _____

Expected Graduation Date (semester and year): _____

Residential Address: _____ Apt/Room #: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone #: _____

Are you currently working on campus? Yes No. If yes, how many hours do you work per week? _____

Employment Information

Employer: _____ Job Title: _____

Location of Employment: _____
Address

City: _____ State: _____ Zip Code: _____

Start Date: _____ End Date: _____ Hours Per Week: _____

Supervisor's Name: _____ Title: _____

Supervisor's Phone #: _____ Email: _____

Do you have a Social Security Number? Yes No. (Social Security Number is required for paid internship **only**).

Signature: _____ Today's Date: _____



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ACADEMIC ADVISOR'S CPT RECOMMENDATION FORM

This form is for an academic advisor to recommend an international student to participate in an internship or a co-op program (also known as Curricular Practical Training (CPT)) in accordance with the Department of Homeland Security (DHS) regulations.

TO BE COMPLETED BY ACADEMIC ADVISOR

Student's Name (Last, First): _____ EKU ID: _____

Course Number*: _____ Title: _____

Number of credits: _____ Semester: _____

Internship start date (if known): _____ Internship end date (same as end of semester): _____

Number of hours per week: 20 hours or less (part-time) More than 20 hours (full-time)

***This course must have an internship component that is clearly stated in the course description.**

Curricular Practical Training (CPT) is employment that is directly related to the student's field of study, and is "an integral part of an established curriculum". 8 C.F.R. § 214.2(f)(10)(i). This means the internship, co-op, or practicum is either required for the degree program, counted as an elective for the student's degree program, or required for the research for a student's thesis or dissertation. **Please note:** Authorization for CPT comes from the Office of International Student and Scholar Services (OISSS). A student may **ONLY** begin CPT after receiving a new Form I-20 with an OISSS advisor's endorsement.

Please select one criteria below to help us determine whether the student's proposed internship activity meets DHS requirements for CPT authorization.

- An internship or co-op is **required** of all students in the program in order to earn their degrees.
- An internship or co-op is an elective in the program and the student will receive credit toward graduation.
- Internship is required for this graduate student to perform **research** directly related to his or her thesis or dissertation.

CPT is authorized one semester at a time. A student must reapply for any additional semester of CPT.

Name of Academic Advisor Title

Email Phone

Department

Signature Date