An F-1 student may be authorized by the Office of International Services to participate in a curricular practical training program that is an integral part of an established curriculum.

According to the Code of Federal Regulations (CFR):
Curricular practical training is defined to be alternative work/study, internship, cooperative education, or any other type of required internship or practicum that is offered by sponsoring employers through cooperative agreements with the school. Students who have received one year or more of full time curricular practical training are ineligible for post-completion academic training. Exceptions to the one academic year requirement are provided for students enrolled in graduate studies that require immediate participation in curricular practical training. A request for authorization for curricular practical training must be made to the Office of International Services. A student may begin curricular practical training only after receiving his or her Form I-20 with the Office of International Services’ endorsement. [8 CFR 214.2(f)(10)(i)]

F-1 Curricular Practical Training Application Procedures

Step 1 – Both the student’s Employer/Clinical Site Instructor and their Academic Advisor must complete their respective forms

- The student may include a copy of their Job Offer Letter in addition to the Employer Form
  
  The student may not substitute a Job Offer Letter for the Employer Form

- The student will need to enroll for the designated course corresponding to the CPT Application

Step 2 – Submit the following documents to the Office of International Services (OIS) front desk. The OIS office is open for document drop off Monday – Friday: 8:30 AM – 5:00 PM

- F-1 Curricular Practical Training Application
- Employer Form
- Academic Advisor Form

Step 3 – OIS will issue a new CPT I-20

- OIS will contact the student by Email when their new I-20 is ready
- The student may not begin their CPT until they have picked up the new I-20 and the start date indicated on page three of the form is valid

Step 4 – Pick up the new I-20 and begin the Curricular Practical Training

- The student will need to provide the new I-20 to their employer to validate the work authorization
F-1 Curricular Practical Training Application

Family Name: ____________________________ First/Given Name: ____________________________ UIN: ________________

E-mail: _________________________________ Date of Birth (mm/dd/yyyy): ___________________

Phone #: _______________________________ Major(s): ____________________________________

Degree Level: □ Bachelor  □ Master  □ Doctorate  □ Other ________________________________

Do You Work on Campus?  □ Yes  □ No  If Yes, How Many Hours per Week? ________________

Eligibility Requirements:

1. Curricular Practical Training (CPT) is defined as an internship, co-op or practicum and must be approved by one of the assigned representatives in the student’s college/school.

2. The student must be in lawful F-1 student status and have been a full-time student for one academic year before applying. [Exception: graduate programs that require immediate participation in curricular practical training.]

3. The student must be registered for an approved course that corresponds to the internship, co-op or practicum.

4. Participation in CPT can only occur before degree completion. The student cannot extend their I-20 to participate in CPT if all academic requirements have been met.

5. The student must meet with an OIS advisor during open advising hours or by appointment to submit this CPT application.

6. CPT is employer specific and approved on a semester by semester basis.

7. The student may not begin work until they have received the new I-20 endorsed by OIS and the start date of the authorization has been reached. The student must stop working on the last day indicated on the I-20. Working without authorization is a violation of F-1 status.

Note 1: If the student participates in full-time CPT for twelve months or more, the student will no longer be eligible for Optional Practical Training (OPT).

Note 2: All employment while school is in session is limited to 20 hours per week or less. This total includes the number of hours the student works on-campus and off-campus. (Example: If the student works 10 hours per week for an assistantship, then they may only work 10 hours a week for their internship.)

Signature of Student: ___________________________________________ Date: ________________
Form is required to be completed by the Employer or Clinical Site Instructor for International Student Curricular Practical Training (CPT) Application

Instructions for Employer or Clinical Site Instructor: Thank you for taking the time to complete this form. By doing so, we may approve this student to temporarily engage in practical training with you. This information is required according to federal immigration regulations. Please note that the student may not begin working until the CPT has been authorized, through the issuance of a new I-20.

Student Name: ____________________________________________________________
Family First/Given

Name of Company: __________________________________________________________

Site Address of Employment/Clinical instruction where CPT Activity will occur:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Name of Supervisor/Clinical Site Instructor: ________________________________

Email: ___________________________ Phone: ________________________________

Employment or Site Placement will Begin on _____________ and End on ____________.

Number of Hours Student Will Work per Week: ____________ □ Full Time or □ Part Time □ Paid or □ Unpaid.

Position Title: ____________________________________________________________

Brief Position Description (please provide attachment on department letterhead if further space is required):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Name of Company Representative/Clinical Site Instructor Completing Form ____________________ Signature ____________________

Title of Company Representative/Clinical Site Instructor Completing Form ____________________ Date ____________________

Email: ___________________________ Phone: ________________________________
Please return this completed form and any job offer letter to the student. The student will submit the complete CPT application to the Office of International Services.

Form is required to be completed by the Academic Advisor or Co-op Director for International Student Curricular Practical Training (CPT) Application

Student Name: _______________________________  _______________________________ UIN: _______________________________

Family  First/Given

In order for a student to qualify for Curricular Practical Training (CPT), the experience must be an integral part of an established curriculum and be related to the student's field of study. The following reasons qualify for curricular experience. Please indicate which applies to the student’s situation*:

☐ An academic internship/co-op is **required** of all students in this program in order to graduate.

☐ An academic internship/co-op is a **formal component** to this program and the department has a specific course (noted below) designed for this purpose.
  - Please attach an explanation on department letterhead describing how this academic internship/co-op is an integral component of the student’s program and why off campus employment is necessary.

☐ Experience gained from this practicum is **integral to the student’s thesis/dissertation research**. The student is registered for the appropriate thesis/dissertation/independent study course.
  - Please attach an explanation on department letterhead describing how this practicum is an integral component of the student’s thesis/dissertation research and why off campus employment is necessary.

*If none of these reasons apply, the student cannot be authorized for CPT. However, the student may have another option for work authorization in his/her field called Optional Practical Training. If the student is interested in this option, please refer them to speak with an OIS advisor.

Academic Department: ____________________________________________________________________

Student is registering for Course # _____________ and student will earn ______ credits for CPT during

The ☐ Fall Semester  ☐ Spring Semester, or  ☐ Summer Semester of _____________ (year).

Number of Hours Student Will Work per Week: _______  ☐ Full Time or  ☐ Part Time  ☐ Paid or  ☐ Unpaid.

Employment to Begin on _________________ and End on _________________.

What type of final evaluation will be used to assess the student’s participation in the designated course?

☐ Essay/final paper  ☐ Presentation  ☐ Project  ☐ Other: _______________

Date of course evaluation: _________________ (NOTE: Must occur on or after employment end date).

____________________________________________________________________________________

Advisor / Co-op Director Name  Signature  Date

Email: __________________________________  Phone: __________________________________

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