Elmhurst University

# CURRICULAR PRACTICAL TRAINING I-20 REQUEST FORM

| **Student Information**<br>**To be completed by the student after registering for the identified course and securing an internship offer.** | |
|---|---|
| Last Name (Family Name): | First Name (Given Name): |
| Student eNumber: | Telephone Number:<br><br>Email Address: |
| Level of Study<br>(select one): ☐ Undergraduate ☐ Graduate | |
| I am applying for<br>(select one): ☐ **Part-time Curricular Practical Training** (20 hours per week or less)<br>☐ **Full-time Curricular Practical Training** (20 hours per week or more; refer to CPT tutorial for full-time CPT limitations) | |

*I have been enrolled on a full-time basis and have maintained lawful F-1 student status for at least one academic year (or I qualify for participation in off-campus employment in my field of study prior to the completion of one academic year at Elmhurst University due to my academic degree program requirements). I request Curricular Practical Training (CPT) for the term indicated below and will not begin off-campus employment before receiving the appropriate authorization to do so.*

**Student's Signature:** **Date:**

**Academic Recommendation**
**To be completed by the course faculty after the student has registered for the identified course and secured an internship offer.**

The student above is registered for the following required internship/elective course for the term indicated below. The student's employment authorization will correspond with the **START** and **END** dates for the term indicated below:

Internship/Elective **Course Number**: _____ Number of **Credit Hours**: _____

**Term/Year** Enrolled in Internship/Elective Course: _____ / _____

Expected Graduation **Term/Year** in which all degree requirements will be completed: _____ / _____

Name of Employer/Company: _____

Address of Employer: _____
STREET ADDRESS CITY STATE ZIP CODE

The **Code of Federal Regulations** 8 CFR 214.2 (f) (10) states: "An F-1 student may be authorized, by the Designated School Official (DSO), to participate in a curricular practical training program which is an **integral part of an established curriculum**. Curricular practical training is defined to be alternate work/study, internship, cooperative education, or any other type of **required** internship or practicum which is offered by sponsoring employers through cooperative agreements with the school."

**I certify that this internship fulfills a degree requirement**. This internship course is an integral part of our department's established curriculum, supervised by a faculty member, has clearly defined established course objectives, and is listed in the school's course catalog. The student will be making normal progress toward degree completion while pursuing practical training.

**Faculty's Name:** **Faculty's Signature:** **Date:**

(TM – 11/21)