



F-1 Curricular Practical Training (CPT) Forms: Student; Department; Employer

F-1 Curricular Practical Training (CPT) STUDENT Form

Purpose of Form: This form must be completed by all F-1 students requesting authorization for CPT from the Office of International Programs (OIP).

What is Curricular Practical Training (CPT)?

- CPT is designed to provide students with the opportunity to gain employment experience that is “an integral part of the established curriculum.” This can be defined as work/study, internship, cooperative education or any other type of required internship or practicum offered by an employer.
- 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* or *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.
- 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 OIP.
- Any changes in the employment (i.e. employer, location, dates of employment) require a new CPT application. The student must resubmit a new application to the OIP and wait for a newly issued I-20 in order to continue employment.

Deadline(s):

- Submit the completed CPT form along with the additional required documents (see the checklist below) to the OIP at least 2 weeks in advance of the proposed start date.
- Work authorization must be granted on a new Form I-20 before the student may begin CPT employment.
- OIP processing times are 3-5 business days from the time the student’s complete application for CPT is submitted.

Eligibility:

In order to qualify for CPT, a student must

1. have completed 2 semesters of full-time class work
2. be in good F-1 status.

(Graduate student requirements differ.)

Lincoln University will only issue internship work permission for 4 months. Requests for longer times will only be approved on a case by case basis.) Not all CPT requests will be honored.

Required Steps and Checklist:

In order to submit a complete application for CPT, take the following actions:

- If an internship is not required of all degree candidates in the academic program, the student must earn at least 6 hours of course credit (undergraduate) and 3 hours of course credit (graduate) for the 4-month period in which they engage in CPT. Review the checklist below for additional information.
- The student must be enrolled in the course(s) for which they will earn CPT credit before the OIP can authorize the CPT. The credit(s) must be earned during the semester in which the CPT will occur.
- Sponsored students must contact his/her sponsor to ensure that the application for CPT does not violate the conditions of his/her sponsorship.

Submit the following documents to the OIP (Student should submit all documents together):

- F-1 CPT Student Form (this form)
- F-1 CPT Department Form
- F-1 CPT Employer Form
- An official, signed job offer letter on company letterhead
- Proof of class registration during CPT (print Lincoln University schedule)

F-1 Curricular Practical Training (CPT) STUDENT Form

1. Student Last Name: _____ Student First Name: _____

2. LU ID#: _____ Email: _____

3. Major: _____ Degree Level: Bachelor's Master's

4. Employer Name: _____

5. Physical Address of Employment Location: _____

City: _____ State: _____ Zip Code: _____

6. Job Title: _____

7. Requested CPT Start Date: _____ Requested CPT End Date: _____

Statements of Understanding:

- I will only work between the start and end dates indicated on the second page of the CPT I-20. If I engage in employment prior to receiving my newly issued I-20 or work beyond the authorized end date, I will be in direct violation of the F-1 program and my SEVIS record will be subject to termination.
- During the major semesters (fall and spring), I am not permitted to work on-campus in addition to working off campus with my CPT authorization (Master's program exceptions). During annual vacations (winter, spring, and summer break), I am permitted to work on-campus full-time in addition to working off-campus with my CPT authorization.
- I will update my "Local Address" within 10 days of moving. (graduate students)
- I will stop working if there are any changes to my employer or any of my employment information, such as my address of employment, until the OIP has updated my I-20.
- The course credit for this CPT is an integral part of my degree program as I explained on page 1 of this form.
- My enrollment for immigration purposes is based on my CPT as well as any associated courses/credits. I understand that if I choose not to continue my CPT, I must work with the OIP and my academic department to ensure that I meet the full-time enrollment requirement. If I will not meet this requirement or do not notify the OIP that my CPT has ended, I understand that I will be in direct violation of the F-1 program and my SEVIS record will be subject to termination.
- If I travel outside of the U.S. during CPT, I understand that it may violate my CPT and that I should first consult with my employer, academic coordinator, and international student advisor.
- I understand that failure to follow F-1 regulations and the above statements could result in the termination of my F-1 status.

My signature confirms that the information provided on this form is true and accurate and that I read and understand the Statements of Understanding listed above (electronic signatures not permitted).

Signature: _____ Date: _____

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 from the Lincoln University Office of International Programs (OIP). Please complete this DEPARTMENT form and return it to the student so they can submit the application to the OIP at least 2 weeks in advance of the proposed start date.

What is Curricular Practical Training (CPT)?

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Deadline(s):

- Student must submit the CPT Forms (Student, Department, and Employer) to the Office of International Programs (OIP) at least 2 weeks in advance of the proposed start date
- Work authorization must be granted on a new Form I-20 before the student may begin CPT employment.
- OIP processing times are 3-5 business days from the time the student’s complete application for CPT is submitted.

1-6 to be completed by the student requesting CPT; 7-14 to be completed by Academic Department

1. Student Last Name: _____ Student First Name: _____

2. LU ID# _____ Email: _____

3. Major: _____ Degree Level: Bachelor’s ____ Master’s ____

4. Employer Name: _____

5. Job Title: _____

6. Requested CPT Start Date: _____ Requested CPT End Date: _____

Continued: F-1 Curricular Practical Training (CPT) DEPARTMENT Form

To be completed by Academic Department:

7. Is the student in good academic standing and meeting departmental expectations? Yes No

8. I certify that this internship/practicum is ONE of the following:

A mandatory requirement for all degree candidates in our program that cannot be waived (If selected, the student should include the appropriate pages of the University catalog showing this requirement.)

Required as an integral part of the established curriculum (the course is on the approved degree plan, there is an established curriculum, and credits are being awarded)

Required as part of the research for thesis or dissertation (graduate students only)

9. Students expected date of graduation: Month _____ Year _____

10. Has the academic advisor met with the student to establish specific course objectives that the student will be expected to achieve during the training (this is a requirement for CPT authorization)? Yes No

11. List all course(s) for which the student will be receiving credit for CPT. At least 3 credit hours must be earned unless the training is a requirement of all degree candidates that earns no credit.

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

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12. Semester and Year in which the credits will be earned: Semester: _____ Year: _____

13. Name of LU faculty member monitoring the student's progress: _____

14. 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 employment? Please note that there must be such an agreement in order for the OIP to authorize the CPT employment? Yes No

Academic Department's Statements of Understanding:

- 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.
- 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 Department of Homeland Security's CPT requirements could result in the student violating federal regulations and could jeopardize our ability to host international students at Lincoln University.

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

Academic Advisor/Graduate Advisor (Required of all students; electronic signatures not permitted)

Name: _____ Signature: _____ Date: _____

Department Chair/Graduate Coordinator (Required of all graduate students in addition to the academic advisor signature)

Name: _____ Signature: _____ Date: _____

F-1 Curricular Practical Training (CPT) EMPLOYER Form

Purpose of Form: This form must be completed by the employer who offers a position of employment to any F-1 student of Lincoln University applying for CPT. Please complete this entire form and return it to the student so they can submit the application to the Office of International Programs (OIP) at least 2 weeks in advance of the proposed start date.

What is Curricular Practical Training (CPT)?

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Deadline(s):

- Student must submit the CPT Forms (Student, Department, and Employer) to the Office of International Programs (OIP) at least 2 weeks in advance of the proposed start date.
- Work authorization must be granted on a new Form I-20 before the student may begin CPT employment.
- OIP processing times are 3-5 business days from the time the student's complete application for CPT is submitted.

Required Steps Checklist: In order to submit a complete application for CPT, they must obtain the following documents from the employer:

__ A completed F-1 CPT Employer Form (this form)

__ An official, signed job offer letter on campus letterhead – job offer must include beginning and end dates of employment, salary, and job description

Lincoln University Office of International Programs and Services Contact Information:

Office of International Programs
Lincoln University
1570 Baltimore Pike
Lincoln University, Pa 19352
Phone: 800-365-8000
Email: intlprgrms@lincoln.edu

F-1 Curricular Practical Training (CPT) EMPLOYER Form

This entire form must be completed by the CPT employer.

1. Student Last Name: _____ Student First Name: _____

2. Employer Name: _____

3. Physical Address of Employment Location: _____

City: _____ State: _____ Zip Code: _____

If the student will be employed and/or paid through a management company, contracting agent, or a similar arrangement and it will be necessary to include this agency's name and/or address on the student's Form I-20, please provide this information below. Note: The student's Form I-20 must include the address where the student will be physically working. If the section below is completed, the LU OIP will add this information to the remarks section of the CPT authorization. Both addresses will appear on page 2 of the Form I-20:

4. Contracting Agent's Name: _____

5. Address of Contracting Agent: _____

City: _____ State: _____ Zip Code: _____

6. Job Title: _____

7. Student's Job Duties: _____

8. Requested CPT Start Date: _____ Requested CPT End Date: _____

9. Number of hours per week the student will work while on CPT: _____ hours per week.

10. Are you aware that the job will be training performed in satisfaction of degree/course credit requirement? (Note: this is a requirement for CPT to be authorized) ___ Yes ___ No

My signature confirms that the information provided on this form is true and accurate and that the students will only be permitted to work during the authorization dates listed on their form I-20 (electronic signatures not permitted).

Name: _____ Signature: _____

Email: _____ Phone: _____ Date: _____