

CURRICULAR PRACTICAL TRAINING (CPT)

GRADUATE STUDENT CPT APPLICATION PACKET

Graduate Study and Lifelong Learning
520 O'Dowd Hall

www.oakland.edu/gradstudy

Name of Student

To Be Completed by Graduate Study

- ___/___/___ CPT application received in 520 ODH
- ___/___/___ Student has appointment with ISSO for authorization (if known)
- ___/___/___ Student notified CPT application is incomplete
- ___/___/___ Corrected CPT application received in 520 ODH
- ___/___/___ CPT application completed
- ___/___/___ Student notified CPT application ready for pickup

F-1 students who wish to participate in an off-campus training program that is "an integral part of an established curriculum" must first obtain work authorization for CPT. The training must be directly related to the student's major field of study, is defined as "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" (federal regulation 8CFR214.2(f)(10)).

CPT ELIGIBILITY - GRADUATE STUDENTS

- CPT can only be used *during* a student's program of study. Graduate students, who have completed their program requirements, and are using CPT to delay graduation are **NOT** eligible (students should consult ISSO to discuss options).
- The F-1 student must be in status at the time of application and have been in lawful F-1 status for one full academic year (nine months) preceding the CPT application.
- Graduate students must be in good academic standing with an overall GPA of 3.0 or above.
- Each semester that a graduate student is engaged in CPT, s/he must submit a completed Graduate Student CPT Application Packet for approval.
- Each semester that a graduate student is engaged in CPT, s/he must maintain enrollment in a course that is approved by your academic adviser as appropriate to CPT for that semester. The CPT course must be credit bearing.
- Graduate students who are seeking authorization for CPT must maintain enrollment in a minimum of 8-credit hours for each semester they engage in CPT.
- Graduate students holding a Graduate Assistantship position are **NOT** eligible for CPT.

CPT CHECKLIST AND APPLICATION PROCEDURE - GRADUATE STUDENTS

Graduate students must meet and submit the documents listed below to the International Student and Scholarship Office (ISSO) no later than 7 business days **before you plan to engage in CPT**.

STEP ONE

Submit your completed Graduate Student CPT Application Packet to your 1) faculty adviser for approval and signature; and 2) Graduate Study and Lifelong Learning -520 O'Dowd Hall to confirm academic program standing. The following documents are required for **STEP ONE**.

- An **Employment Offer Letter** from the company in which you intend to participate in CPT (sample included in packet)
- A current **Plan of Study**, to be signed by your faculty adviser, that shows the course in which you will obtain credit in CPT.
- The **Graduate Student CPT Application Request** form – signed by your academic adviser (included in packet)
- Evidence of **Enrollment in the course** for the semester in which you will obtain CPT credit.
- Complete Section A of the **I-538 form** (included in packet).

When the CPT application has been certified by Graduate Study, notification will be sent to your OU e-mail that your CPT packet is ready for pick up

STEP TWO

The following documents are required for **STEP TWO**

- CPT Application Packet – approved by academic adviser and certified by Graduate Study
- Current SEVIS I-20

If your packet is not completed or documents are missing at the time of your appointment with Dave or Petra your appointment will be rescheduled.

As a reminder, the CPT application process must be completed each semester you are engaged in CPT.

Social Security Numbers (SSN)

- All individuals who will be employed in the United States must have a SSN.
- Graduate students who do not have a SSN must apply for one at the Social Security Administration prior to starting employment.

SECTION 1 - TO BE COMPLETED BY GRADUATE STUDENT						
Student Name						
Last		First			MI	
Student #	Sevis #	OU Email *			Daytime Phone Number	
G00	NØ <small>(located on I-20)</small>	*notification will be sent to your OU e-mail once the CPT application has been certified by Graduate Study				
Name of Graduate Program					<input type="checkbox"/> Master	Credits Earned
					<input type="checkbox"/> Doctoral	
Admitted to Program		Expected Graduation		Select below (if applicable to plan of study)		
<input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Summer Year ____		<input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Summer Year ____		<input type="checkbox"/> Thesis <input type="checkbox"/> Dissertation		
Requested Semester to Engage in CPT		Will you be employed ON-CAMPUS during the semester you are engaged in CPT				
<input type="checkbox"/> FA 20____ <input type="checkbox"/> WI 20____ <input type="checkbox"/> SU 20____		<input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please complete the information requested below)				
Graduate Assistantship (attach copy of GA Agreement)				Other Campus Employment		
<input type="checkbox"/> yes <input type="checkbox"/> FT (20hrs)** <input type="checkbox"/> PT (10hrs)				<input type="checkbox"/> yes # hours employed per week _____		
**STUDENTS HOLDING FT GRADUATE ASSISTANTSHIP (20HRS) MAY NOT ENGAGE IN FT CURRICULAR PRACTICAL TRAINING				Dept Employed _____		
Name of CPT Company _____					<input type="checkbox"/> First Time CPT	
Street Address _____					<input type="checkbox"/> Continuing CPT	# HRS PER WK
City _____ State _____ Zipcode _____					CPT Start Date	CPT End Date
Telephone # _____ Fax # _____					/ /	/ /
Name of CPT Supervisor _____					CPT dates listed above must fall within the dates of semester you are engaged in CPT	
Please provide a brief description of the CPT position						
CURRICULAR PRACTICAL TRAINING HISTORY						
Course #	Name of Previous CPT Employer	Start Date	End Date	FT	PT	Semester
I certify that the information provided above is correct. <ul style="list-style-type: none"> ▪ I am aware that when I have satisfied all requirements for my degree I am no longer eligible to pursue curricular practical training. ▪ I understand that it is my responsibility to register for the required internship or elective course to satisfy the USCIS CPT regulation. ▪ I understand that I cannot begin employment until I've been granted work permission for CPT by ISSO 						
STUDENT SIGNATURE						DATE

EMPLOYMENT OFFER LETTER - SAMPLE
in support of Curricular Practical Training (CPT)

[Letter must be produced on company letterhead stationary]

[date]

[name of student]
[address]

Dear [name of student]:

[name of company] is pleased to offer you temporary employment in support for your curricular practical training application. You are scheduled to work [number of hours] per week, beginning [start date] and ending [end date]. This period of employment corresponds to the dates of your semester classes. For this employment you will be paid a rate of [amount/time].

During the term of your employment, your major duties and responsibilities will include [brief description of tasks to be performed].

In addition, it is our understanding that you will be authorized to accept this employment under United States Citizenship and Immigration Services (USCIS) regulations governing Nonimmigrant Students (F-1) and Curricular Practical Training (CPT) status. I certify that this position is not meant to be long-term employment for you, but rather a temporary position to be performed during the regular class dates of your semester.

Sincerely,

[signature of responsible individual in company]
[name and title of responsible individual in company]

CPT EMPLOYMENT OFFER LETTER

Please be sure the following information is included in your employment offer letter. This information is meant to be additional documentation to protect your visa status by validating the fact that you are working legally. An original should be submitted at your scheduled meeting with the International Student and Scholarship Office as part of your CPT application packet.

*Your name

*Name of company

*Hours of work per week

* Detailed description of your duties

* Starting and ending dates (per semester)

Section A. This section must be completed by the student, as appropriate. (Please print or type):

1. Name: (Family in CAPS) (First) (Middle)		2. Date of birth:
3. Student I-94 number:	4. Date first granted F-1 status (visa date or change of status date):	
5. Level of education being sought (UG, Grad, PhD):	6. Student's major field of study:	

7. Describe what is the reason for your practical training with this employer:

Beginning date: _____ Ending date: _____ Number of hours per week: _____

8. List all periods of previously authorized employment for practical training:

A. Previous CPT: Company Name, City and State of Employment	B. CPT dates: in chronological order (oldest to most recent)

Signature of student: _____ Date: _____

Section B. This section must be completed by the designated school official (DSO) of the school the student is attending or was last authorized to attend:

9. I hereby certify that:

The student named above:

☐ Is taking a full course of study at this school, and the expected date of completion is: _____

☐ Is taking less than a full course of study at this school because: _____

Check one:

- ☐ A. The employment is for practical training in the student's field of study. The student has been in the educational program for at least nine (9) months, is in good academic standing, and is eligible for the requested practical training in accordance with INS regulations at 8 CFR 214.2(f)(10). The training that the student will participate in is an integral part of an established curriculum.
- ☐ B. The employment is for Optional Practical Training (OPT). The student is in good academic standing.

10. Name and title of DSO:	Signature:	Date:
11. Name of school: Oakland University	School file number: DET214F000763000	Telephone Number: (248) 370-3358