



**Curricular Practical Training (CPT)
Academic Advisor Recommendation**

SECTION A: STUDENT INFORMATION		
DU ID:	LAST (FAMILY) NAME:	FIRST NAME:
Training Provider Name:		
Training Start Date:	Training End Date:	
Hours: <input type="checkbox"/> Part-time (20 hrs or less per week) OR Full-time (more than 20 hrs per week)		

SECTION B: ACADEMIC or FACULTY ADVISOR RECOMMENDATION

By Federal Immigration Regulation, "An F-1 student may be authorized...to participate in a curricular practical training program which is an integral part of an established curriculum". {8 CFR 214.2(f)(10)(I)} Training that is related to the major and provides employment experience does not necessarily meet the requirements of Curricular Practical Training.

Complete this form after reviewing the training description provided by the student.

NOTE: Independent Study Credits CANNOT be used for Experiential Learning.

Choose one:

- The training is required for the student's degree (NOTE: This must be documented in an official university publication).
If applicable: Course # _____ Number of Credits _____ Term _____

- The training will provide research or training that is necessary for the student's approved thesis or dissertation.
 Topic and/or title of thesis or dissertation: _____
 Describe how the training is necessary for the approved thesis/dissertation:

- The training is required to earn experiential learning credit for which the student will register.
 Course # _____ Number of Credits _____ Term _____

If you checked this option, answer the questions on the next page.

SEE NEXT PAGE

Describe the academic deliverables of this training. (i.e. paper, presentation, report, etc.)

Describe how this training connects to the student's current degree and major.

Describe how this training is considered "integral" to the program of study/curriculum the student is pursuing. Refer to program documentation (website/catalog) if applicable.

____ Initial here if the student's CPT is full-time (more than 20 hrs per week) and you agree with the following: CPT will not affect the student's academic performance during the term(s) for which CPT has been requested or delay normal progress towards degree completion.

ACKNOWLEDGEMENT:

I have reviewed this training description and it is my opinion that the training is in the student's major field of study and that it is "an integral part of the established curriculum." I understand that my academic recommendation will be used by ISSS to evaluate if this training meets F-1 immigration regulations. I understand that this information is required by the U.S government and can be provided to specific government agencies for review.

SIGNATURE:

DATE:

PRINTED NAME:

DEPARTMENT: