



Curricular Practical Training / Internship Confirmation

International Student: Please fill out this form and have your academic advisor sign it. Bring the completed form to your CPT appointment with the International Student & Scholar Services (ISSS) office. The form must be signed by your advisor **before you begin employment.**

STUDENT INFORMATION

Full Name:

Last

First

Local Address:

Street Address

Apartment/Unit #

City

State

ZIP Code

Email:

Major/Field of Study:

EMPLOYMENT INFORMATION

Employer Name:

Employer Address:

Street Address

Suite/Unit #

City

State

ZIP Code

Supervisor Name:

Supervisor
Email:

Job Description:

Part-Time or Full-Time
(specify):

Hours/Week

Employment Start
Date:

End Date:

ACADEMIC CREDIT INFORMATION

Course Credit:

Department

Course Name/Number

Credit Hours

Academic Advisor: Please sign below and return to student. By signing this form, you attest to the following:

I, _____ do hereby certify that the above-captioned student will be pursuing
Print Name
employment that is an integral part of his/her academic curriculum and is related to his/her major field of study.

Academic Advisor
Signature & Date:

Signature

Date