

CURRICULAR PRACTICAL TRAINING (CPT) REQUEST FORM

To be comple	ted by the student
Last Name:	Given Name: ort) (as appears on passport)
DU ID#:	SEVIS ID#:
Major:	Country of Citizenship:
	Bachelor's Master's Doctorate DU Email:
	ON CHECKLIST (submit via email to careers@dom.edu) All documents listed below must be to scheduling a meeting with Career Development.
	m: Anticipated Degree End Term:
	ternship/employment offer letter on company letterhead that includes start date, end date, number of reek, and signature from the employer.
	ternship/employment offer letter that includes a description of job duties demonstrating direct to my major and degree level.
	and will remain enrolled in an internship course during the term the CPT work authorization will occur.
I understan	nd that I cannot begin my internship until the start date on the CPT I-20 and cannot work past the end CPT I-20.
I have com	pleted this form, the explanation below, and signed the certification (pages 1 and 2 of this form).
of study. Expl	alations require that a practical training opportunity be directly related to the student's major area ain in 3-5 sentences how your employment/internship, as described in your
employment/i	nternship offer letter, is directly related to your major field of study:
that my practical accurate descrip notify an F-1 Cou offer letter or expectage complete the interpretation.	I: I have read and understand the eligibility requirements and work restrictions of CPT. I certify training opportunity is directly related to my major field of study and have provided an tion of how my employment/internship is directly related to my major field of study. I will unselor at Dominican University immediately regarding any changes or deviations from the clanation provided above regarding my CPT opportunity. I understand that if I drop or do not ternship course required for CPT authorization during this term, my CPT authorization will iderstand that if I continue to work after dropping or completing the internship, I will be in ternship.
Signature:	Date:



To be completed by the International Student Advisor

Signature of DSO:				Date:			
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			_				
To be complete	_		-				
CPT EMPLOYMENT IN	IFORMATION (If s	ummer CPT, summer	fees must be paid)				
CPT Term:	Fall	Spring	Summer I	Summer II	Summer III		
Start Date:							
Hours per Week:	Part-Time C	PT (20 hours or less p	oer week) Full-Tir	ne CPT (more than 20 hours	s per week)		
Company Name:							
Company Address:	Street Address_						
	City		State	Zip Code			
DU Faculty Superviso	r:						
Enrolled in:		credit hours					
Paid, hourl	y rate	Un	paid				
Signature of Care	er Development s	taff member:					
Date:							
SOCIAL SECURI	TY NUMBER						

The student consulted with a DSO and understands the rules and regulations governing CPT

A Social Security Number (SSN) is required to receive wages and to file taxes.

If your CPT has been approved by Dominican University and you do not have a SSN, please contact the International Student Advising Office. Students who already have an SSN do not need to apply for a new SSN.

The earliest you can apply for a Social Security Number is 30 days before your CPT internship/employment start date. For more information about applying for an SSN, please review the <u>Getting a Social Security Number</u> on the International students page under Continuing students.