

CURRICULAR PRACTICAL TRAINING: REQUEST FORM

Curricular Practical Training (CPT) is an off-campus employment option available to F-1 students when the training (i.e. internship or employment) is considered an integral part of the established curriculum and directly related to the student's major. "Training" refers to paid or unpaid work/study experience, internships, or cooperative education.

STUDENT ELIGIBILITY

- 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.
- Must have an employment/training offer related to your major area of study

CPT HOURS & LIMITATIONS

- Not permitted to work until you receive an I-20 authorizing specific CPT dates
- CPT is authorized on a semester by semester basis.
- Approved for a specific employer and a specific time period
- May not change employers or extend training without prior authorization from LACC
- Does not affect eligibility for Optional Practical Training (OPT), unless you have completed 12 months of full-time CPT
- Students may use CPT at any time after completion of one academic year and prior to program completion
- CPT is authorized on a semester by semester basis. Fall/Winter Aug. 31 – Jan. 31 or Spring/Summer Feb. 1 – Aug. 30

APPLICATION PROCESS

- Obtain letter from prospective employer stating terms of employment, including: (see sample letter)
 - Employment start and end dates
 - Full-time or part-time employment ("part-time" is a maximum of 20 hours per week)
 - Location of employment
- Submit employer offer letter and CPT Recommendation Form to Career Services at least **two weeks prior** to anticipated start date
- If approved, LACC ISP will issue a new I-20 with CPT authorization (allow three to five days for I-20 issuance)

STUDENT REQUEST

Student Name _____ Email Address _____

ID-Number _____

Full-Time CPT (21 hours or more)

Requested CPT Start Date _____

Part-Time CPT (20 hours or less)

Requested CPT End Date _____

Prior to this request I have, I have NOT, engaged in Curricular Practical Training. I have used _____ months of CPT.

EXPLAIN HOW THE EMPLOYMENT IS RELATED TO YOUR MAJOR (*Curricular)

Employer Name _____

Employer Address _____

How is this Employment *Curricular

DEPARTMENT CHAIR/ ADVISOR AUTHORIZATION

With this signature, the Department Chair/Advisor agrees that the above-named student will engage in training that is considered integral to the established curriculum and is directly related to the student's major area of study.

Department _____ Chair/ Advisor _____ Signature _____

DESIGNATED SCHOOL OFFICIAL AUTHORIZATION

Designated School Official _____ Signature _____ Date _____

EMPLOYER INFORMATION & SAMPLE LETTER

Employers: Please note the following regarding international students at LA CITY COLLEGE

- All current students (sophomores to seniors) are eligible to work in the United States, under their F-1 student visa status. You do not need to provide sponsorship for them to work.
- All recent graduates are eligible to work in the United States for at least 12 months post-graduation, under their F-1 student visa status.

***Must be submitted on EMPLOYER letterhead. Wording should be similar to the following:**

SKY BLUE, INC.
1492 Neptune Drive
Mars City, Pluto 07777
201-000-1111

April 1, 2021

Mr./Ms. Ideal Student
10 Canal Street
Venus, Milky Way 92655

Dear Mr./Ms. Student:

This is to confirm that Sky Blue, Inc., is offering you an internship as a Small Craft Designer for XXX months starting September 9, 2021 and ending December 15, 2013. This employment will serve as "curricular practical training" as part of your academic program at LA CITY COLLEGE. The goals and objectives of your training with us will be practical experience in guiding small ramjet-driven craft through the solar winds in earth proximity, without disintegrating upon return. The location of your training program will be the company space yard in Site 12 City. Your training supervisor will be Amerigo Hobbes, Vice President for Earth Relations. His/her address, email and telephone number are as follows.

Address: _____
Address: _____
City _____ State _____ ZIP _____
Phone _____ Fax _____
Email _____

You will be expected to work XX hours each week for a salary of \$\$\$\$\$. You will be provided with access to company benefits, will not be provided with access to company benefits.

On behalf of the company, I welcome you to Sky Blue.

Sincerely
Nina Pinta
Director of Personnel