



**INTERNATIONAL PROGRAMS OFFICE**

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**Request for Curricular Practical Training Authorization**

The International Programs Office (IPO) requires this form be completed by F-1 students applying for CPT. You must submit this application and your employment offer letter to request CPT authorization.

**STUDENT INFORMATION**

Name: \_\_\_\_\_ NMU IN: \_\_\_\_\_

SEVIS ID: \_\_\_\_\_  Undergraduate  Graduate

Current I-20 Program End Date: \_\_\_\_\_ Major: \_\_\_\_\_

Phone Number: \_\_\_\_\_ NMU Email: \_\_\_\_\_

For which semester(s) are you requesting CPT? \_\_\_\_\_

**EMPLOYER INFORMATION**

Name of Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employment Start Date: \_\_\_\_\_ Employment End Date: \_\_\_\_\_

Part-time  Full-time

**STUDENT REMARKS**

In the box provided, please write a short description of how your planned employment relates to your major and the courses you are studying at NMU. This description should be 3-4 sentences and will appear on your I-20 form.

**STUDENT CERTIFICATION**

- I understand that I may only work within the approved CPT dates.
- I understand that I may only work for the approved CPT employer.
- I understand that I must be enrolled in an internship credit during the same semester of my CPT if the CPT is not a required part of my curriculum.
- I understand that if I work full-time for a year, my OPT eligibility will be eliminated.
- I understand that if I change employers during my CPT, I must submit a new application and new documentation to the IPO.

\_\_\_\_\_ Student Signature

\_\_\_\_\_ Date

**To Be Completed by Academic Advisor or Department Head**

The student listed above is requesting Curricular Practical Training (OPT) authorization in their field of study. In order to authorize CPT, the International Programs Office is required to obtain confirmation of the student’s status by their academic advisor or department chair. Please complete the required information.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Department: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Briefly describe (in 3-4 sentences) how participating in this work experience is pursuant to content that the student has learned or will learn while enrolled in their specific program. How does engaging in this work satisfy program requirements.

*\*Please note that this information is required by the Department of Homeland Security in order to approve the CPT.*

Has the student completed all program requirements thus far?  Yes  No, explain:

Student’s expected date of completion/graduation: \_\_\_\_\_

This CPT is:

**Required** (all students in this major must participate in an internship in order to fulfill graduation requirements)

An **integral part** of the students curriculum and is relevant to their academic program.

Course Name and Number: \_\_\_\_\_

Semester enrolled: \_\_\_\_\_

# of credits: \_\_\_\_\_

I recommend this student for CPT and attest that all information is accurate to the best of knowledge.

\_\_\_\_\_ Signature

\_\_\_\_\_ Date