

DEFINITION: Curricular Practical Training (CPT) is work authorization that allows international students on F-1 visas to engage in internships or other curricular work experience required for their program of study. CPT is governed by the following rules:

- Students must either a) be enrolled in an internship course, or b) be working to satisfy an experiential education requirement outlined in the students' program of study
- All CPT must be complete before the student's completion of course requirements
- Students may work full-time (20+ hrs/wk) or part-time (<20 hrs/wk), but they must continue to make adequate progress toward degree completion
- Any student who is employed full-time (20+ hrs/wk) for the equivalent of one full year will lose eligibility for Optional Practical Training (OPT)
- Students **MUST** secure CPT authorization from the international student advisor **before** they begin working
- CPT requires a signed cooperative agreement between the University and the employer, or a letter from the employer

ELIGIBILITY REQUIREMENTS: In order for the Designated School Official (DSO) to grant CPT approval, the following requirements must be met:

- 1) Student must have completed one academic year (or two consecutive semesters) of full-time enrollment in the degree program of study (Time spent in non-degree status is not applicable)
 - a. Graduate students whose program **requires** work experience in the first year are exempt
 - b. Transfer students' enrollment at other institutions in the same academic program is applicable
- 2) Students must continue to make adequate progress toward degree completion while working
- 3) Students must obtain verification from the academic department that the work fulfills curricular requirements by
 - a. Satisfying requirements for a course designated for training or internship in the field of study, OR
 - b. Satisfying co-curricular experiential learning requirements outlined in the Mercer University catalog for the specific degree program

SECTION 1: STUDENT INFORMATION

FAMILY NAME	FIRST NAME	MUID	EMAIL ADDRESS
PROGRAM/COLLEGE	MAJOR	PROGRAM START DATE	PROGRAM END DATE
TITLE OF CPT POSITION	COMPANY NAME	COMPANY ADDRESS	SUPERVISOR NAME
SUPERVISOR PHONE/EMAIL	EMPLOYMENT START DATE	EMPLOYMENT END DATE	APPROX. HOURS PER/WEEK

SECTION 2: DEPARTMENTAL VERIFICATION

ADVISOR NAME	TITLE	SCHOOL	EMAIL
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CHECK ALL THE FOLLOWING APPLICABLE CONDITIONS:

- MERCER UNIVERSITY HAS A STANDING COOPERATIVE AGREEMENT WITH THIS EMPLOYER (AGREEMENT EXPIRES ON _____)
- MERCER UNIVERSITY DOES NOT HAVE A COOPERATIVE AGREEMENT WITH THIS EMPLOYER; STUDENT MUST OBTAIN LETTER
- THE STUDENT IS EARNING ACADEMIC CREDIT FOR THIS EXPERIENCE (**COMPLETE BOX BELOW LEFT**)
- THE STUDENT IS SATISFYING AN EXPERIENTIAL REQUIREMENT IN THE PROGRAM CURRICULUM (**SUBMIT INFO IN BOX BELOW RIGHT**)

COURSE TITLE, CODE, AND CREDIT HOURS (IF APPLICABLE)	EXPERIENTIAL REQUIREMENT (ACCORDING TO CATALOG)
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I verify that the information submitted in this application for CPT authorization is complete and correct.

ADVISOR SIGNATURE	DATE
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