



Global@flagler.edu

CURRICULAR PRACTICAL TRAINING (CPT) ADVISOR ENDORSEMENT FORM

International (F-1) students must submit this form to the Center for Global Education to obtain CPT authorization prior to beginning any internship, practicum, Co-op, or work/study off-campus activity, whether paid or unpaid. Practical training may be authorized to an F-1 student who has been lawfully enrolled on a full-time basis for one academic year. Exceptions to the one academic year requirement are provided for students enrolled in graduate programs that require them to begin CPT in the first year of study.

To be completed by student:

Full Name

Flagler Student ID#

Name of Employer

Address of Employer (street address, city, state, zip code)

Dates of employment (maximum authorization is limited to the start and end dates of the semester):

____/____/____

____/____/____

start date

end date

Hours per week (over 20 hours is full-time)

Brief description of proposed responsibilities: _____

Signature

Date

To be completed by student's Internship/Practicum/Co-op Advisor OR student's Academic Advisor:

This student will be enrolled in and receiving _____ credits for _____ for the _____ term.
credits Course number Semester/Year

Please read and initial the following requirements for CPT authorization:

Yes, this off-campus training is directly related to the student's major area of study: _____

Yes, the off-campus training is an integral part of this student's established curriculum and will count towards the student's degree. _____

Answer the following only if applicable: **Yes**, this student's graduate program requires off-campus training during the first year of study. _____

Internship/ Practicum/Co-op/Academic Advisor name

Phone Extension

Department

Signature

Date