



Office of International Enrollment
 MUSKINGUM COLLEGE
 163 Stormont Street
 New Concord, OH 43762

Curricular Practical Training Advisor Verification Form

To the Academic Advisor: :

_____ (student) is applying for authorization for Curricular Practical Training under **8 C.F.R. § 214.2(f)(10)(i)**. He or she needs your assistance to verify that this training/internship is required for a program or class and directly related to his or her major(s) in order for the employment to be authorized:

8 C.F.R. § 214.2(f)(10)

(10) *Practical training*. Practical training may be authorized to an F-1 student who has been lawfully enrolled on a full time basis, in a Service approved college, university, conservatory, or seminary for one full academic year [...] An eligible student may request employment authorization for practical training in a position that is directly related to his or her major area of study. ..

8 C.F.R. § 214.2(f)(10)(i): Curricular Practical Training

(i) *Curricular practical training*. An F-1 student may be authorized by the DSO to participate in a curricular practical training program that is an integral part of an established curriculum...

I certify that the above student has completed the attached approved internship proposal and is enrolled for (term) _____ in (course number) _____ for (number of) _____ credit(s). I will be the supervising professor for this internship. I recommend the student be granted a Curricular Practical Training period for the following reason(s):

 _____.

The student is expected to complete his/her degree in (month and year) _____.

The student has/has not (circle one) been a full-time student throughout his/her studies at Muskingum College.

 Faculty Advisor Signature

 Date

 Faculty Advisor Name (print)

 Department

For office use only:

CPT authorized in SEVIS and endorsed I-20 issued: Date ____/____/____ Staff Initials _____