

## Saint Anselm College Office of International Programs Curricular Practical Training Request Form

International students must complete the CPT form, in addition to the Internship Form required by your major, if an internship is in the U.S., is required as a graduation requirement, or if you have an active internship/job offer.						
As an F-1 student, you may engage in a 1. You have been lawfully enroll 2. Your proposed employment i 3. Your academic program requ	led in school full-time f s related to your major	or at least ni field of stud	ne-cor ly.	nsecutive months.		
Section A. This Section must be completed by the student						
Family Name:*	First Name:*			Middle Name(s), if any:		
Saint Anselm ID:	Date of Birth (mr	Date of Birth (mm/dd/yyyy):*		Non-Saint A's Email:		
Phone:	Major:					
Describe the proposed employment for practical training:						
Name of Employer:						
Street Address of Employer:	City:		State:		Zip Code:	
Requested CPT Start Date:	Requested CPT End Date:			l-time e than 20 hours)	□ Part-time (less than 20 hours)	
Are you taking this internship for credit?						
Student Signature:		Date:		Date:		
Section B: This section must be completed by your Academic Advisor						
The student named above is applying for Curricular Practical Training. Under immigration regulations, this type of						
training/employment can only be authorized if it meets certain criteria. In order for our office to assess if the proposed training meets the requirements, please complete and sign this form. Thank you.						
			Department:			
Is this student enrolled full-time for th	e semester requesting	CPT? □ Ye	es 🗆	No		
When will this student complete his or	r her studies at Saint A	nselm? (mm	/dd/yy	/yy):		
Will this student receive academic cre	dit for this training exp	erience? $\square$	Yes 🛚	□ No If yes:		
Course Number & Title:						
# of credits to be assigned:	Semester course wi	II be taken:	<b>Note</b> : Training dates must correspond with course enrollment			
Signature:		Date:				
Submit this form to the Office of International Programs with a copy of your offer letter.						

Section C. This section must be completed by OIP						
Student's Program Begin Date:	Student's Program Begin Date:					
Prior Periods of Practical Training, if any:	CPT:	ОРТ:				
Reviewed and approve by:		Date:				