

CAREER CENTER (CIP OR CO-OP) CURRICULAR PRACTICAL TRAINING (CPT) APPLICATION

Federal regulations define Curricular practical training (CPT) as employment authorization which fulfills an “integral part of an established curriculum.”

DEADLINES:

- The deadline to apply for CPT for any given semester is the **add/drop date** of the semester.

INFORMATION:

- International Student Services **must approve** CPT and provide a new I-20 with CPT information.
- **Your CPT I-20** is needed in order to legally work.
- Employment opportunities must meet **specific academic requirements** to qualify for CPT.
- In most cases, you can work a **maximum of 20 hours/week** total during the school year, off-campus and on-campus employment combined.
- During official summer and winter breaks, CPT can be authorized for up to **40 hours/week**.
- Full-time CPT is **not allowed** during the fall & spring semesters except for the following reasons:
 - 1) You are in program that requires a full-time internship during Fall/Spring.
 - 2) You are in your final semester & have been approved to enroll less than full-time, and your academic course expressly requires or recommends full-time employment.
 - 3) You are a graduate student, you have completed all coursework requirements, and you need CPT for dissertation or thesis research
 - 4) You have been approved for a cooperative education program through the Career Center
- **CPT is work-site and employer specific.** Authorization must be renewed each semester.

ELIGIBILITY:

- You must have been fully enrolled as a student for at least **one academic year**.
- While utilizing CPT, you are required to **maintain F-1 status**, including full-time enrollment.

CAREER CENTER CPT APPLICATION CHECKLIST

- Academic Advisor Recommendation Form completed and signed
- Employer Recommendation Form OR Official Offer Letter with details of employment
- Career Center Form
- Registration in USC 999
- A passing score on the CPT Online Workshop quiz or attendance at a qualifying in-person workshop

International Student Services

CURRICULAR PRACTICAL TRAINING APPLICATION UNIVERSITY OF SOUTH CAROLINA EXPERIENTIAL EDUCATION CPT

ACADEMIC ADVISOR COMPLETES THIS SECTION:

1. In which courses will the student enroll during the semester of this work experience? (*If none, leave this section blank.*)

Course Name & Number:

Course Name & Number:

Course Name & Number:

Course Name & Number:

Course Name & Number:

2. The student is expected to graduate: Fall Spring Summer Year:

3. Explain how the requested off-campus work enhances or supports the completion of the program of study.

Certification: *In signing this form, I certify the following: I recommend that this student be granted CPT work authorization to fulfill a experiential education opportunity that is integrally related to the program of study. The information on this form is true and accurate.*

Name:

Title & Department:

Phone:

Email:

Signature:

Date:

International Student Services

CURRICULAR PRACTICAL TRAINING APPLICATION UNIVERSITY OF SOUTH CAROLINA EMPLOYER FORM

Curricular Practical Training (CPT) is employment authorization for F-1 students which fulfills an **integral** part of an **established** curriculum. F-1 student must be in status & in good academic standing. The employer, the student, and the academic advisor must agree on clearly defined course objectives for the program, as it must be done to satisfy degree requirements. **Return this completed form to the student or scan and email to iss@sc.edu. If you have any questions, please call (803) 777-7461.**

EMPLOYER COMPLETES THIS SECTION:

1. Student's First Name:		2. Student Last Name:	
3. Employer/Company Name:			
4. Physical Address Where Student Will Work:			
5. Student's Job Title:			
6. Student's Job Duties:			
7. Employment Start Date:		8. End Date:	9. Number of hours per week:
10. Name of Employer Contact Person (<i>supervisor or HR contact</i>):			
11. Title of Employer Contact Person:			
12. E-mail address of Employer Contact:			
13. Telephone Number of Employer Contact:			
Employer Certification: My organization is aware that this training experience will be performed in satisfaction of an integral academic component at the University of South Carolina. IF APPLICABLE: My organization has discussed with the student the possibility of the student conducting research and collecting data while employed with our company and the possible use of this data in the student's thesis or dissertation. <i>My signature below confirms that the information on this form is true & accurate. I understand that this information will be reported to the Department of Homeland Security.</i>			
Signature:		Date:	