F-1 CURRICULAR PRACTICAL TRAINING (CPT)



OFFICE FOR INTERNATIONAL STUDENTS AND SCHOLARS

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WHAT IS CPT?

Curricular Practical Training (CPT) is temporary employment authorization **directly** related to an F-1 student's academic program and granted by the Designated School Official (DSO) at the Office for International Students and Scholars (OISS). CPT is typically done on a part-time (up to 20 hours a week) basis during the school year and can be done on a full-time (over 20 hours a week) basis or part-time basis during vacation periods. CPT gives students the possibility to work off campus or to work for more than 20 hours a week on campus if certain qualifications are met (see eligibility requirements).

NOTE: MSU policy limits the hours a student can work to a maximum of 29 hours a week during fall and spring semesters and full-time when classes are not in session, even with CPT.

CPT ELIGIBILITY

- F-1 students are eligible for CPT after completion of two semesters of full time study (one academic year). Exception: Graduate students whose degree **requires** immediate participation in an internship may apply at any time.
- F-1 students who are requesting full-time CPT during the academic year **must be registered full-time.** Students may not take a reduced course load and then apply for full-time CPT. There are two exceptions to this rule: 1) when a program requires that all students who are done with course work proceed to an internship semester or year; OR 2) when a student is in his/her last semester before graduation.
- Students who are approved for a reduced course load and are applying for part-time CPT will be considered on a case by case basis.

NOTE: CPT **will not be granted** to students who have finished their program requirements and who are merely delaying graduation to make use of CPT.

TYPES OF CPT

- Required for the degree program: In order for training to be considered "required," all students in the degree program must be required to complete an internship or practicum in order to receive their degree. Very few programs at MSU have such requirements. Proof of requirement from Registrar Office (RO) Academic Programs Catalog or Department website must be included with CPT request.
- Integral part of an established curriculum: If the internship is not required, then it must be taken for academic credit. The student and the advisor will need to note the appropriate course number on the CPT Authorization Form, and the student must show OISS proof of enrollment. If the internship takes place in the summer, students can either enroll for an internship credit or connect CPT to a relevant class being taken that semester or the upcoming fall semester.

MORE INFORMATION ABOUT CPT

- You must have a signed, written offer of employment on the employer's letterhead to apply for CPT. Please refer to details about offer letter requirements under "Steps for Applying for CPT." Even off-campus unpaid internships may require authorization by OISS.
- Part-time CPT is defined as working 20 hours or less per week and does not affect Optional Practical Training eligibility. Full-time CPT is defined as working more than 20 hours per week. If you accumulate 12 months or more of full-time CPT authorization, then you will not be eligible for OPT.
- If you change employers while on CPT or will work for more than one employer at a time, you need to file a new CPT application. CPT is employer specific; that is, you can only work for the company that is listed on your I-20.

NOTE: Music students with multiple "gigs" should consult with the Music Department and complete the <u>Curricular Practical Training (CPT)</u> - <u>Music Short-Term Gigs Only.</u>

- You are authorized for specific dates of employment on your I-20. You may not begin before the start date or continue working after the end date. If you expect that you will need to work past your end date, you must reapply for CPT and be approved by OISS. If you work before you are authorized or past the authorized CPT end date, you will be working without employment authorization and your immigration record will be terminated.
- OISS cannot authorize CPT with a start date in the past. (Please submit all completed paperwork at least 7 to 10 days in advance of the day you wish to begin working.)
- OISS will only authorize CPT for one semester at a time. Students must reapply by completing all necessary steps in the process for each semester that they will work on CPT.
- If you will be employed outside of the Lansing area and are using MSU's Blue Care Network (BCN) health insurance, please make sure you know which local doctor's offices and hospitals are in BCN's network. If you need medical care and accidentally go to an out-of-network health care facility, you will pay much more for your medical bills than if you go to an in-network facility. Search for in-network health care facilities here: http://www.bcbsm.com. Special note for students applying for summer CPT: Spring semester registration includes a fee for both spring and summer health insurance coverage. If you did not receive a waiver of MSU's BCN health insurance, you will automatically have health insurance coverage for the summer term.

NOTE: For tips on preparing for the U.S. workplace, visit: www.oiss.msu.edu/documents/students/workprep.pdf

STEPS FOR APPLYING FOR CPT

- 1. Meet with your Academic or Graduate Advisor to discuss appropriate employment opportunities for your major.
- **2.** Find an internship, co-op, practicum, or other position. For assistance, contact MSU's Career Services Network.
- **3.** Complete **Student section** of the CPT Authorization Form.
- **4.** Have your Academic or Graduate Advisor complete the **Academic or Graduate Advisor section** of the CPT Authorization Form.
- **5.** Come to OISS during walk-in hours (M-F, 1-3pm) or make an appointment online to see an advisor and bring the following required documents with you:

	lonowing required documents with you:						
	Passport						
	I-94 card or Printout of the electronic I-94 screen from CBP website: www.cbp.gov/I94						
	Current I-20						
	CPT Authorization Form completed and signed by your Academic Advisor/Graduate						
	Advisor/Major Professor						
	Proof of course enrollment to cover all periods of work. A printed copy from StuInfo						
_	is sufficient.						
Proof of requirement from RO Academic Programs Catalog or Department website							
_	must be included with CPT request – Required CPTs only.						
Employment Letter signed by employer on company/business letterhead giving the							
	following information:						
	☐ Job title						
	Beginning and ending dates of employment						
	☐ Wage/salary/remuneration						
	Number of hours per week to be worked						
	Full address of employer						
	☐ Brief description of work						

Once the above documents have been submitted to OISS, a new I-20 will be issued to you in approximately 1 week. OISS will email to your MSU email address, after your new I-20 is ready.

CURRICULAR PRACTICAL TRAINING AUTHORIZATION

Last Name: First Name: Bachelors MSUE-mail: PID#:A Phone: Masters Masters Masters Doctoral Employer Address: Dot of Title: Certificate City: State: Zip Code: Certificate City: State: Zip Code: Dot Title: Start Date: End Date: Number of hours per week: Brief description of what type of work will be done and what will be learned: Number of hours per week: Brief description of what type of work will be done and what will be learned: Number of hours per week: Brief description of what type of work will be done and what will be learned: Date: /	THIS SECTION MUST BE COMPLETED BY THE STUDENT								
Name of Employer: Employer Address:	Last Name:		First Name:			Bachelors			
Employer Address:	MSU E-mail:	PID#: A Ph		Phone) :	Masters			
Cay: State: Zip Code: Job Title: Start Date: End Date: Number of hours per week: Brief description of what type of work will be done and what will be learned: I am enrolled in the course listed by my advisor below during the semester/s stated below and understand that failing to complete the course voids the work permission. If my work permission is voided, I understand that I will lose my F-1 student visa status. Student's Signature:	Name of Employer:	Doctoral							
Job Title: Start Date:	Employer Address:								
Start Date: End Date: Number of hours per week: Brief description of what type of work will be done and what will be learned: I am enrolled in the course listed by my advisor below during the semester/s stated below and understand that failing to complete the course voids the work permission. If my work permission is voided, I understand that I will lose my F-1 student visa status. Date:/	City:			Zip Code:					
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Has student finished all program requirements at this point? Yes No All students: Expected Completion Date of Degree Requirements:/ Graduate students: Expected Defense Date (or Comprehensive Exam Date for non-thesis Master's students):/_ This CPT is: Required (all students in this major must do an internship or they will not graduate from this program) Proof of requirement from RO Academic Programs Catalog or Department we bsite must be included with CPT request. An 'integral part of the student's curriculum' and is relevant to his/her academic program. Course Name & Number: Semester Enrolled: Number of Credits: Name (print): Name (print):	complete the course voids the work particles to student visa status.				understand that	I will lose my F-1			
How does this CPT meet the student's academic objective? (If you need more space please write a letter) Has student finished all program requirements at this point? Yes No All students: Expected Completion Date of Degree Requirements: // / / Graduate students: Expected Defense Date (or Comprehensive Exam Date for non-thesis Master's students): // / / This CPT is: Required (all students in this major must do an internship or they will not graduate from this program) Proof of requirement from RO Academic Programs Catalog or Department website must be included with CPT request. An "integral part of the student's curriculum" and is relevant to his/her academic program. Course Name & Number: Semester Enrolled: Number of Credits: Name (print): Title: Department: Phone:	Student's Signature:				Date:	//			
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	Department:								
Academic or Graduate Advisor Signature: Date:	E-mail:		I	Phone:					
	Academic or Graduate Advisor S	gnature:				Date:			