

**Graduate Coordinator Recommendation Form
For International F-1 Student Curricular Practical Training**

This form provides OISS with information required to grant CPT work authorization to an international student in F-1 visa status. The Graduate Coordinator must complete and sign.

Student Information:

Family (Last) Name _____	First Name _____	Middle Name _____
Program (Major) of Study _____	EIU E-Number _____	SEVIS ID # (Upper Left Corner of I-20) _____
Email Address _____	US Phone Number _____	

Internship Information:

Company Name: (Employment offer letter required.): _____

Job Location Address: (must be actual address where you will be working)

_____	_____	_____	_____
Street	City	State	Zip Code

Number of hours per week (part-time is 20 hours or less): _____

Begin Date: _____ End Date: (CPT is approved on a per semester basis): _____

(Month/Day/Year) (Month/Day/Year)

Graduate Coordinator MUST select ONE of the following to explain how this CPT is integral to the student's curriculum:

- ☐ **Student will receive course credit for a work-based learning experience which is an integral part of the student's degree program.**
Course Title & Number: _____
- ☐ **This internship will fulfill a requirement to the student's degree program.**
Degree level and field: _____

Please explain why this CPT is integral to the student's course of study:

As the student's Graduate Coordinator, by signing this form I am certifying that this Curricular Practical Training is REQUIRED and an integral part of the student's degree program. I also confirm student is enrolled in an internship or coop class and enrolled full-time if spring or fall semester.

Graduate Coordinator's Name: _____

Graduate Coordinator Signature

Date

NOTE: If CPT is to go beyond the end date listed above the student is required to submit a new recommendation form. Student **MUST** have an I-20 showing this CPT is authorized **BEFORE** they can begin working.

You must contact OISS before you change CPT employers!