



Curricular Practical Training-Student Information

Biographical Data: To be completed by the student

Family Name:		First and Middle Name:		Birth Date:	
Email:			SU Student ID:		
U.S. Street Address:					
City:		State:	Zip:	Phone #:	
Country of Citizenship:			Immigration Status:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Current Degree Level:			Current Major:		
# of hours of On-Campus Employment: <small>(If working on campus, you are limited to a total of 20 hours/week of any work)</small>			Expected Degree Completion Date: (Semester/Year) <small>(If completing this semester, your CPT will end on the day you complete)</small>		

Please Submit the Following:

<input type="checkbox"/> This form, completed
<input type="checkbox"/> Completed Academic Advisor Certification
<input type="checkbox"/> Completed Employer Form - If your employer will fax the form, it is YOUR responsibility to make sure we receive the form. Please call or email once faxed to ensure proper processing.
<i>Please note the following:</i> - You may NOT begin working until you have received a new I-20 authorizing you to work for the specific company. - Normal processing is 7-10 business days. - You must be registered (or pre-registered) for the CPT course before we can approve your CPT request. - If you will have multiple employers, you must turn in a new Employer form for each employer.

**I have fully completed the above information and understand the regulations regarding this process:
If I have any questions, I will consult with WORLD staff.**

Signature	Date:
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