## **CURRICULAR PRACTICAL TRAINING (CPT) REQUEST**

SECTION A: To be com	pleted by student:			
Student's Name:	Mama	Given (first) Name		Ialla Maraa (a)
Family (last) Name				ldle Name(s)
Vlajor:		Expected Graduation Date:		
Rocket Number:				
Name of Employer:				
Street Address:			Suite/	Unit #:
City:		State:	Zip Co	ode:
Position Title:				
Hours Per Week:	CPT Start Date:		CPT End Date: _	
Description of Work Dutie	s:			
Please explain how this tr	aining opportunity is i	ntegral to your ac	ademic degree pro	ogram:
STUDENT'S STATEMEN	IT OF RESPONSIBIL	ITY		
✓ Lunderstand that it is r	ny responsibility to comply	with all immigration	regulations which app	olv to F-1 students.
	ulations included in this ha	•		•
	curriculum" and "directly re	•		_
·	•		•	
✓ I understand that if I fail to comply with my responsibilities, it may jeopardize my stay in the U.S. and I may religible for benefits normally granted to F-1 students. Failure to comply may also affect future filings.				•
My signature below indica	ites that I have read ar	nd understand all	of the above.	
Student Signature				
Date:				CENTER FOR INTERNATIONAL STUDIES AND PROGRAMS

THE UNIVERSITY OF TOLEDO
OFFICE OF INTERNATIONAL
STUDENT & SCHOLAR SERVICES

Updated: 03/24/2016

## **CURRICULAR PRACTICAL TRAINING (CPT) REQUEST**

SECTION B: To be completed by advisor or department:	
Staff/Faculty Name: Title:	
College:	
Course that student is enrolled in that requires CPT:	
Please select only one. This CPT represents:	
☐ A required training internship which earns credits (e.g., Engineering co-ops, Phacelinicals, student teaching, or other required internships/practicums);	armacy rotations, Nursing
An elective training internship which earns credits (e.g., Internship, Practicum, o offered through your college);	r Independent Study course
An elective training internship that is integral to a student's dissertation/thesis collection from a particular corporation/research facility)	(e.g., technology use or data
<b>Describe how the training experience is integral</b> (According to CFR 214.2(f)(10) part of an established curriculum" and "directly related to the student's major area of student's major area.	.,
DEPARTMENT'S STATEMENT OF RESPONSIBILITY	
✓ I understand that it is my responsibility to ensure that the student is participating in a integral part of an established curriculum and directly related to the student's major a	•
✓ I understand that if I fail to appropriately recommend CPT, it may jeopardize the student in the U.S. and it may affect their eligibility for benefits normally granted to F-1 student.	•
✓ I certify that the training experience listed above is sanctioned by the university class and supervised by the appropriate staff or faculty member.	room. It will be structured
My signature below indicates that I have read and understand all of the above.	
Staff/Faculty Signature	CENTER FOR INTERNATIONAL
Date:	THE UNIVERSITY OF TOLEDO OFFICE OF INTERNATIONAL STUDENT & SCHOLAR SERVICES