REGULATIONS GOVERNING CURRICULAR PRACTICAL TRAINING (CPT)

Eligibility Requirements:

1) Curricular practical training is possible for F-1 students who have been lawfully enrolled on a full-time basis for one academic year (Fall/Spring semesters).
2) Students must be in good academic standing and must be making satisfactory progress toward the degree.
3) The type of off-campus experience must be directly related to the student's major program of study.
4) Students are not eligible for CPT in the semester that the thesis or dissertation is to be submitted.
5) Non-thesis students are eligible for CPT in the final semester of the degree program as long as an Application for the Degree has been filed and reviewed by the Office of Graduate Studies.

Regulations of CPT Experience:

1) CPT is authorized one term/semester at a time;
2) Students must be registered in a CPT course for each term; 3 credits in fall and spring semesters; 1 credit is required in winter and summer sessions;
3) CPT must be authorized on the I-20 prior to the start date of the appointment;
4) CPT is limited to two academic terms (fall and spring semesters); Winter and summer sessions are not considered as academic terms.
5) CPT must be approved by 4 pm on the last day of free drop/add in any semester or term (no exception permitted);

Application Procedures:

1) Students must complete the **CPT application form (revised August 2007)**;
2) Students must acquire a **letter from the company** indicating the description and responsibilities of the appointment, the exact address of the location of the CPT appointment, the dates of appointment, the number of hours per week;
3) Students must acquire the **Company/Organization Registration Form**;
4) Students must acquire the **Director/Advisor's CPT Application form** that is to be completed by the Director/Advisor;
5) Students must submit all of the above forms to the Office of Graduate Studies for review and signature at least one week before the first day of the start of CPT;
6) OFSS must approve the application for CPT no later than 4:00 pm on the last day of free drop/add in any semester or term (no exceptions permitted);

NOTE: Accepting work appointments without the proper authorization is a serious violation of student F-1 status. Failure to comply with all immigration regulations may cause a student to not be eligible for benefits normally granted to F-1 students and, in some situations, may cause the student to be subject to deportation. CPT may be for 20 hours per week (part time) or for more than 20 hours per week (full time). Students who accumulate 12 months of full-time CPT will not be eligible for Optional Practical Training (OPT) at the time of degree completion. Part-time CPT does not affect OPT eligibility. Once a student has filed an application for OPT, the student may not apply for CPT. A CPT application is employer specific and must be made for each experience; that is, if a student changes companies or places of work during the approved CPT period, the student must submit a new CPT application. (Students in the English Language Institute are not eligible for CPT or OPT.)

Office of Foreign Students & Scholars, Student Services Building, 30 Lovett Avenue, Newark, DE 19716-6410
Tel: (302) 831-2115, Fax:(302) 831-2123, E-mail: foreignservices@udel.edu

APPLICATION
TO BE COMPLETED BY STUDENT

Curricular Practical Training (CPT) is an academic experience. It is an internship which is an integral part of an established curriculum. CPT may be performed with any one of the University of Delaware's registered Curricular Practical Training Partners. **CPT is not meant to be a convenient employment opportunity nor is it meant to be a device to save Optional Practical Training (OPT). One application is required for each term of CPT as outlined below. A student may only participate in a maximum of two CPT semesters. Participation in CPT must not prolong your date of graduation. You must pay for and will receive the credits as listed. Students may not begin CPT training prior to approval of this form and the issuance of a CPT I-20.**

SUBMIT THIS FORM TO THE OFFICE OF GRADUATE STUDIES. AFTER YOUR ADVISOR SUBMITS THEIR PORTION OF THE APPLICATION, WE WILL BEGIN TO PROCESS YOUR APPLICATION.

ALLOW 1 WEEK PROCESSING TIME

Section 1-To Be Completed By Student: CPT SEMESTER			
THIS CPT WILL BEGIN IN (SELECT ONE)		CREDITS	APPLICATION DEADLINE
☐	SPRING (FEB 1-MAY 31)	3	Last day of free drop/add
☐	SUMMER (JUNE 1-AUGUST 31)	1	Last day of free drop/add
☐	FALL (SEPTEMBER 1-DECEMBER 31)	3	Last day of free drop/add
☐	WINTER (JAN 1-JAN 31)	1	Last day of free drop/add

Section 2-To Be Completed By Student: STUDENT INFORMATION			
Name		**Telephone**	**E-Mail**
Student ID #	**Degree**	**Expected Graduation Term** SPRING ☐ SUMMER ☐ FALL ☐ WINTER ☐	**Year**
Major/s			**Thesis** ☐ Submitted ☐ Finished – Not Submitted ☐ Begun – Not Finished ☐ Have not begun writing ☐ Not Applicable
Sevis Number:		**First Day of CPT**	
Required Credits Remaining in Major/s : _____		**Last Day of CPT**	

Section 3-To Be Completed By Student: EMPLOYER INFORMATION		
Name of Registered Company/Organization		
Name of On-Site Supervisor	**Telephone**	**E-Mail**
Title of Student's Position	**Hours/Week** ☐ 20 ☐ 40	**Paycheck Issued By:** ☐ UD ☐ Employer ☐ None **Other:**_____

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APPLICATION
TO BE COMPLETED BY ADVISOR

NAME OF STUDENT		
Section 1-To Be Completed By Student's Advisor: PURPOSE		
What will the student do at the site – what are the goals to be accomplished? (You may attach a memo if you prefer.)		
Section 2-To Be Completed By Student's Advisor: COURSE EVALUATION METHOD		
GRADING CRITERIA	**If "Thesis/Dissertation," explain here**	
Test ☐		
Thesis/Dissertation ☐		
Other ☐		
If research is providing data for thesis/dissertation, will there be any issues related to confidential information gained at the CPT site and used in the thesis/dissertation?		☐ **Yes** ☐ **No**
Section 3-To Be Completed By Director/ Student's Advisor: AUTHORIZATION		
DIRECTOR/ADVISOR Name (Printed)	**Telephone**	**E-Mail**
DIRECTOR/ADVISOR Signature	**Title**	**Address**
Section 4-To Be Completed by Department Chair: AUTHORIZATION		
NAME OF CHAIR (Printed)	**Telephone**	**E-Mail**
SIGNATURE OF CHAIR	**Title**	**Address**
Section 5-To Be Completed By The Office of Graduate Studies/Office of Foreign Students & Scholars: AUTHORIZATION		
OFFICE OF GRADUATE STUDIES	**Date Approved**	
OFFICE OF FOREIGN STUDENTS & SCHOLARS	**Date Approved**	

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University of Delaware Curricular Practical Training Company/Organization Registration Form

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UD-CPT COMPANY / ORGANIZATION TO BE REGISTERED		
Name of COMPANY/ORGANIZATION	**Address**	
Name of CONTACT PERSON (Printed)	**Telephone**	**E-Mail**
Contact Person's SIGNATURE		**Date**

COMPANY/ORGANIZATION REGISTRATION	
I authorize the company/organization named above to be added to the list of organizations authorized to provide Curricular Practical Training for students at the University of Delaware.	
STUDENTS ON CPT MAY PERFORM THE DUTIES OF:	
1	
2	
3	

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