

**LETTER FROM ACADEMIC ADVISOR FOR CURRICULAR PRACTICAL TRAINING**

To: International Student Advisor

FROM \_\_\_\_\_

: Advisor's Name and Title

DATE: \_\_\_\_\_

RE: Curricular Practical Training For \_\_\_\_\_

**1. Description of the Training Program**

Job Title \_\_\_\_\_

Employer \_\_\_\_\_

Name, address, phone, and fax number of the training supervisor:

\_\_\_\_\_  
\_\_\_\_\_

Date of CPT: from \_\_\_\_\_ to \_\_\_\_\_ Hours per week \_\_\_\_\_

**2. Goals and Objective of CPT:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. How does CPT relate to the student's major field of study?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Why is CPT an integral/critical part of this student's academic program?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Academic Advisor \_\_\_\_\_

Evaluation by Responsible officer

- 1. I have received this letter and determined that CPT requested  is  is not warranted
- 2. The criteria and limitations set forth in 8CFR 214.2 (f)(10)(i)  is  is not satisfied

\_\_\_\_\_  
Name and Title of Responsible officer

\_\_\_\_\_  
Date