F-1 Curricular Practical Training (CPT) Employer Form

Purpose of Form: This form must be completed by the employer who offers a position of employment to any F-1 student of Texas A&M University applying for CPT. Please complete this entire form and submit it either to the student or to the International Student Services (ISS) office at Texas A&M University. Our contact information is listed above.

What is Curricular Practical Training (CPT)? CPT is work authorization for F-1 international students to receive further training that is directly related to their degree level and major. CPT authorization is dependent upon the student being academically eligible and the employment meeting federal government regulations. F-1 students must apply for CPT if they intend to work off-campus as an integral part or planned option of their established curriculum prior to completion of their academic program whether or not they will receive any form of payment or compensation. ISS determines eligibility for and authorizes the CPT employment. A student authorized for CPT may only be employed by a specific employer, at a specific location and for specific dates as approved by ISS. Any changes in the employment (i.e. employer, location, dates of employment) require a new CPT application. Students may begin employment after receiving authorization that will be recorded on a new Form I-20. Students cannot begin working until authorized on page 3 of their I-20 by ISS and the start date on page 3 of their I-20 has arrived. Students must stop working by the end date of their authorization or upon changing or terminating their employment. Refer to the ISS CPT webpage for additional information and access to all CPT forms: http://iss.tamu.edu/Current-Students/F-1-Status/Curricular-Practical-Training.

Deadline(s): ISS authorization must be granted on a new Form I-20 before the student may begin CPT employment. ISS processing times are 5 to 10 business days from the time the student’s application for CPT is complete.

Required Steps Checklist: In order for a student to submit a complete application for CPT, they must obtain the following documents from the employer:

- An official, signed job offer letter on company letterhead

This entire form must be completed by the CPT employer.

1. Student Last Name: ___________________________ Student First Name: ___________________________

2. Employer Name: ______________________________

3. Physical Address of Student’s Employment Location: ____________________________________________
   City: ___________________ State: _______________ Zip Code: ________________

If the student will be employed and/or paid through a management company, contracting agent, or a similar arrangement and it will be necessary to include this agency’s name and/or address on the student’s Form I-20, please provide this information below.

   Note: The student’s Form I-20 must include the address where the student will be physically working. If the section below is completed, ISS will add this information to the remarks section of the CPT authorization. Both addresses will appear on page 3 of the Form I-20:

4. Contracting Agent’s Name: ___________________________________________

5. Address of Contracting Agent: ____________________________________________
   City: ___________________ State: _______________ Zip Code: ________________

Please note that this form continues onto a second page.
6. Student’s Job Title: _____________________________________________

7. Student’s Job Duties: ___________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

8. Requested CPT Start Date: _____________________________ Requested CPT End Date: _____________________________

9. Number of hours per week the student will work while on CPT: _________ hours per week

10. Are you aware that the job will be training performed in satisfaction of degree requirements? (Note: This is a requirement in order for CPT to be authorized.) ☐ Yes ☐ No

My signature confirms that the information provided on this form is true and accurate and that the student will only be permitted to work during the authorization dates listed on their Form I-20.

Name: _______________________________ Signature: _______________________________ Date: ________________

Email: _______________________________ Phone: _______________________________

“State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.”