



International Student Services
CPT Request

Part I: Academic goals and objectives of the training program (to be filled out by advisor or instructor)

Name of student: _____ Major: _____

Description of how training is linked to student's academic program (please include any associated course names and numbers):

Signature of academic advisor or instructor: _____ Date: _____

Part II: Training program: (to be filled out by employer)

Company Name: _____

Company Address (including Zip code): _____

Student's job title: _____

Number of hours per week: _____

Dates of training: From _____ Until _____

Description of training:

Name of supervisor: _____ Supervisor signature: _____ Date: _____

Part III: Student agreement and acknowledgement of conditions of employment

I understand and accept all the conditions of CPT employment and will fully comply with U.S. immigration law and the policies of TCU. I realize that all employees may not exceed 20 hours (including CPT assistantships and on campus work) and it is my responsibility not to exceed this amount without expressed approval for Full-time CPT.

Student's signature: _____ Date: _____

International Student Services staff use only:

Received by: _____

Date Received _____