



# International Programs

## Academic Chair Form for CPT

Student's Name: \_\_\_\_\_ MSU ID#: \_\_\_\_\_

The student named above is an international student in F-1 status and is applying for Curricular Practical Training (CPT) authorization. CPT is off-campus employment defined by U.S. federal regulations as being an integral part of the student's curriculum and directly related to his/her major field of study (8 CFR 214.2(f)). Your verification of the student's eligibility for CPT is required to ensure that Minot State University is in compliance with these regulations. These documents can be requested by the Department of Homeland Security at any time. If you have questions please contact the International Student Coordinator at [erin.marie.anderson@minotstateu.edu](mailto:erin.marie.anderson@minotstateu.edu).

- I have reviewed the **Student Request for CPT Form**, which describe the goals for the practical training.
- I have reviewed the **Employer Hire Letter** from the hiring company, which includes a position description, supervisor information, training dates, hours per week, and specific plans for meeting the educational goals of the CPT course.
- I have reviewed the **Instructor CPT Objectives Letter** from the instructor of the course indicated above, explaining how this off-campus training opportunity is *integral* to the student's degree program.
- I have reviewed the **syllabus** for the CPT course. The training is a self-contained learning experience that will provide a concise opportunity for the student to meet the specific educational outcomes of the course. The student will submit regular assignments and there is a clear plan for assessment.

Choose the appropriate category for the student's proposal:

- Program Requirement:  
The student is required to engage in the proposed training experience by his/her degree program (Ex: student teaching or required practicum). This requirement is published in the MSU catalog.  
Course title and number in which the student will be enrolled: \_\_\_\_\_ # of credits: \_\_\_\_\_
- Major Requirement:  
The proposed training is accepted as an elective to satisfy degree program requirements (Ex: International Business or Accounting internship electives). The course is listed in the MSU catalog.  
Course title and number in which the student will be enrolled: \_\_\_\_\_ # of credits: \_\_\_\_\_

*I understand that by signing this form, I am certifying that the proposed training meets the criteria of Curricular Practical Training described above, and I recommend that the student be authorized to participate in the proposed training experience.*

\_\_\_\_\_  
Signature of the Department Chair

\_\_\_\_\_  
Department Chair name printed

*Affix department stamp above*