



# OFFICE OF INTERNATIONAL STUDENT SERVICES CURRICULAR PRACTICAL TRAINING (CPT)

*Please allow **48 hours** for processing.*

Last name \_\_\_\_\_ First name \_\_\_\_\_

CWID \_\_\_\_\_ Major \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Name of employer \_\_\_\_\_

Employer address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

I am applying for:

Part time (limited to 20 hours a week)

Full time (more than 20 hours a week)

This internship is:      Paid      Unpaid

I am **not** enrolled in an English as a Second Language (“ESL”) program at Pepperdine University.

I understand that if my CPT is **paid**, I must obtain a new Form I-20 before working.

I will pick-up my new Form I-20 before starting a paid internship.

I will submit a UPS shipping label to [oiiss@pepperdine.edu](mailto:oiiss@pepperdine.edu) via [e-ship global](#).

I certify that I have read and agree to comply with the CPT requirements on the OISS website.

Student’s Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

### ACADEMIC ADVISOR

How is this CPT an integral part of the student’s academic program? \_\_\_\_\_

What is the course # for this internship? \_\_\_\_\_ Term \_\_\_\_\_ Year \_\_\_\_\_

Expected date of program completion (NOT the date of graduation) \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

CPT start date \_\_\_\_/\_\_\_\_/\_\_\_\_ CPT end date \_\_\_\_/\_\_\_\_/\_\_\_\_ Number of hours per week \_\_\_\_\_  
Month Day Year Month Day Year

If the CPT dates precede or exceed the term dates, please explain why this is necessary. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Department \_\_\_\_\_ Email \_\_\_\_\_

### For office use only:

Received by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

I-20 issued by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

I-20 picked up by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

I-20 sent to student by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_