F-1 Curricular Practical Training Request Form

An internship must be part of an elective internship course for academic credit. First, submit this form and a summary of the position and your responsibilities to your academic advisor. Then bring the completed form and a copy of your internship class registration to the International Office.

A. 7	This section is to be comp	leted by the student		
Fam	ily Name	First Name _		
NJC	U ID#			
Majo	r	Degree Level		
	requesting authorization for _ Part-time Curricular Practi _ Full-time Curricular Practi	cal Training (no more than		
l am	requesting employment autl	norization from	to	
Nam	e of employer			
Addr	ess			
City		State	Zip Code	
C4	internship, not just an ex	tension of that experience.		·
Siuu	ent's Signature		Date	
В.	This section is to be comp	leted by the department	chair, academic advisor, c	or program coordinator
l cor	The student is registered During the internship, the of his/her program The dates of the internship If the student is pursuing	e student will be engaged in hip are reasonable to achie a second internship, he/sl	y e to facilitate the internship n activities consistent with the eve the academic goals of the he will be engaged in activities internship to warrant a sec	e student's program les and learning
	employment is approved for veek.	part time (20 hours	or less)full time (mor	e than 20 hours
Nam	e	Title		
Sign	ature	Date		