As part of the BCIS regulations pertaining to F-1 student employment, students may be granted permission to work on or off campus and/or for more than 20 hours per week “to participate in a curricular practical training program which is an integral part of an established curriculum. Curricular Practical Training (CPT) is defined to be an alternate work/study, internship, cooperative education or any other type of required internship or practicum which is offered by the sponsoring employers through cooperative agreements with the school.

ISU majors that qualify for CPT are: Clinical Biology, Counselling, Dietetics, Education (including all DA programs), Health Education, HRTD, Journalism, Nursing, Pharmacy, Public Administration, Radiographic Science and Social Work. Other programs might qualify. Check the appropriate catalogue for your major.

Remember, the internship/externship MUST be a requirement to graduate for students who have been in status for at least nine months. THERE IS ONE EXCEPTION TO THAT RULE FOR GRADUATE STUDENTS who are required by their department to being immediate participation in a required internship.

Students who have received one year (12 months) or more of full-time CPT are ineligible for post-completion practical training (OPT).

The student must present the following documents to Michelle Lewis, Director of Int’l Programs, Hypostyle 284, 282-2794.

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED!

☐ Completed and signed I-538 (download at: www.immigration.gov)

☐ All Original I-20 forms (no copies!!!)

☐ Tranpay/Bill showing internship credits have been registered and paid for

☐ The following information from the academic advisor:

Student’s Complete Name ________________________________

ID Number ______________________

Advisor’s full name and title ________________________________

College of ________________________________________________

Name and location (city) of organization where internship will take place

Intern’s supervisor’s name & title ________________________________

Intern’s supervisor’s phone number _____________________________

Duration of position (give specific dates m/d/y/-m/d/y) _____________________________

Hours/week _________ over….
Task (s) to be performed by student
__________________________________________________________

ISU catalogue course number (NOT index number) _______ Number of credits ______

Advisor’s signature ____________________________ Date________________