



Student's Name: \_\_\_\_\_

Advisor's Name: \_\_\_\_\_ Advisor's Phone: \_\_\_\_\_

Advisor's Email: \_\_\_\_\_

**Student:** Please provide this information for your advisor.

Proposed Employer:

Description of Job Duties:

**Advisor:** Your student is applying for authorization to engage in an internship/practicum, or related employment work off-campus. **Please complete this form for the Center for Global Engagement so we can determine your student's eligibility for the authorization. Please discuss the proposed employment with your student, then:**

1. **Fill in the student's expected completion date.**
2. **Complete the one statement that best fits your student's situation.**
3. **Sign the bottom of the form.**

Student's expected graduation: Term \_\_\_\_\_ Year \_\_\_\_\_

Choose one:

- A. **This student's program, \_\_\_\_\_, requires completion of an internship, practicum, or project.** This requirement is clearly stated in the program description for the major and this proposed work experience will satisfy this requirement. This student is enrolled/will enroll in \_\_\_ internship/project credit hours. Course number and title: \_\_\_\_\_
- B. **This student's program, \_\_\_\_\_, does not require an internship but the department offers internship credit as an elective.** This student is enrolled/will enroll in \_\_\_ internship credit hours. Course number and title: \_\_\_\_\_. Note that a student may enroll in an internship for 0 credit hours, when offered by a department, for only two semesters/terms.
- C. **This student is enrolled/will enroll in course number and title: \_\_\_\_\_.** Work experience is an integral component of the class and all students are offered the option of satisfying a class requirement through employment. Describe the course requirement that will be met by the student's proposed employment:
- D. **The student's program, \_\_\_\_\_, does not require an internship and the department does not offer internship credit. The department recognizes work experience as integral to the student's education at FSU. I confirm that the proposed employment is directly related to the student's field of study and is consistent with the objectives of his/her curriculum. I recommend this student for enrollment in the Experiential Recognition Program (ERP) course offered by the Career Center. The CGE will authorize CPT employment through the ERP one semester at a time, two times maximum.**



FLORIDA STATE UNIVERSITY  
Center for Global Engagement

**Academic Advisor Application  
Form for Student in Courses**

Note:

- **Employment cannot begin before the student has obtained authorization from the CGE.** Work without authorization can result in a termination of the student's immigration record.
- The CGE issues work authorization for no longer than one semester at a time and enrollment must be required along with work authorization unless stated in program description. Continued employment, when necessary, requires a new application.

***By signing, I confirm that the student's participation in the proposed internship/work opportunity will not delay completion of the student's degree.***

Name of Academic Advisor/Internship Director: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of Academic Advisor/Internship Director: \_\_\_\_\_ Date: \_\_\_\_\_