



Student's Full Name: _____

This international student is applying for authorization to train/work with you. This requires prior immigration authorization (Curricular Practical Training/CPT) before the student can begin training/work. We need the information below so that we can evaluate the student's eligibility and have the details required to process the authorization.

The student may only engage in the CPT during the dates authorized on Page 2 of the student's I-20 Certificate of Eligibility for Nonimmigrant Student Status.

Company Name: _____

Physical Address: _____

Employment Information

Proposed Position Title: _____

Position Description and Duties:

Proposed Start Date of Employment (Month/Day/Year): _____

End Date of Employment (Month/Day/Year): _____

Part-time (20 hours/week or less) OR Full-time (over 20 hours/week)

Paid: Yes No

REQUIRED: The employer agrees to cooperate with Florida State University in achieving the curricular purposes of the training. I confirm that the information provided on this form or in a detailed offer letter is true and accurate. **I understand that the student requires authorization prior to commencing training.**

Supervisor or HR Representative _____ Title _____

Phone Number: _____ Email _____

Signature _____