Curricular Practical Training (CPT) is a type of off-campus employment authorization that enables F-1 students to take part in an internship, Co-op, field placement, practicum or service experience that is integral to the curriculum.

**NOTE:** The U.S. Citizenship & Immigration Service (USCIS) defines employment as any type of service for which a benefit, including training, work experience or academic credit, is received. Therefore, even if a student will not be getting paid, s/he should obtain CPT authorization before commencing an internship, Co-Op, practicum or field placement.

Please include the following information in your Recommendation Letter and print it on departmental letterhead:

(Date)

International Student & Scholar Services
210 Talbert Hall
University at Buffalo
Buffalo, NY 14260-1604

To ISSS:

This letter is written to recommend (name of student) for Curricular Practical Training work authorization. The student’s UB person number is (#### - ####).

The proposed CPT is necessary for (name of student) to participate in a(n) (internship, Co-Op, practicum, field placement, or service experience) that is integral to the established curriculum of the (degree program and major).

Please describe here how the proposed work experience is integral to the curriculum.

(If the applicant is a graduate student requesting full-time employment authorization during the Fall or Spring semester, the following statement must be included in the letter:

The proposed full-time (internship, Co-Op, field placement, practicum or service experience) is equivalent to full-time enrollment for the (Fall/Spring) (year) semester.

The student will be registered for (course name and course number / section) during the (Fall/Spring) (year) semester for this work experience, and will earn (# of credits).

The employer is (name of employer). The student will be working at (employer's address, including street, city, state and zip code).

The dates of employment will be from (beginning date) to (ending date). The student is expected to work (# of hours) per week during this time.)
The student will be evaluated by (e.g. written reports, journal, site visits, etc.).

If further information is required, I can be reached at (phone number) or (e-mail address).

Sincerely,

Professor / Academic Advisor’s Name
Title

7/14