

International Student and Scholar Services Buffalo State – 1300 Elmwood Ave South Wing 410 Buffalo, NY 14222 Phone: (716) 878-5331 Fax: (716) 878-3054 Email:herrittl@buffalostate.edu

RECOMMENDATION OF THE ACADEMIC ADVISOR FOR CURRICULAR PRACTICAL TRAINING

This form is used to obtain an advisor recommendation and Dean's approval for Curricular Practical Training off-campus work permission. CPT is available to eligible students who will pursue an internship or other work activities that are integral to their major at Buffalo State. A new I-20 authorizing the specific employment details must be issued by the International Student and scholar Services <u>before</u> you begin any employment. Please allow one week for processing; you will be notified by email when the new document is available for pick up. Additional information on the application process is available through the International Student and Scholar Services.

Student Information:							
Name of Student:		Banner ID#					
Major:		Level:		Undergrad	Masters	S	
Brief Description of Propose	ed Duties of the Employ	yment:					_
Student will be completing a	-			(Name of School	l/Agency)		_
School or Agency Address:_							_
As part of:			(Course)				-
Dates of Employment:	From:	/		To:			<u></u>
The Curricular Practical Tra	Month ining will be:Full-ti	,	/Year Part-tim	Month	/Day	/Year	
Please explain why this part enhance his or her studies?					ent's academi	c program. H	ow will this experience
I certify that the curricular p	practical training exper	rience, describ	bed above a	nd in the employer	's offer letter,	is recommen	ded for this student.
This training is: a reqno	uired part of the degree practicum / into t required by the degree individual stude	ernship) e program, bu					
Advisor's Name and Title:_							_
Academic Department:			Phone:				
Advisor's Signature:			Date:				

Day Month Year