



FLORIDA STATE UNIVERSITY
PANAMA CITY

**Curricular Practical Training
Student Application Form**

FSU Panama City

First Name: _____ Last Name: _____ Date of Birth: _____
Degree Level: _____ Major: _____ Do you currently work on campus?: _____

If you currently work on campus, provide details on the number of hours worked per week, the dates of employment and the name of the employing department:

Read and initial the following statements:

I have read the Curricular Practical Training (CPT) information on the [CPT](#) website.

I have been enrolled full-time for an academic year and am eligible to apply for Curricular Practical Training authorization, OR I am a graduate student in a program that requires immediate internship/practicum/coop/work experience.

I understand that I cannot begin employment until authorized and I must end employment at the end of the authorized period. I understand that unauthorized employment results in termination of my SEVIS record.

I understand that if I use 12 months or more of full-time CPT (more than 365 days total), I will no longer be eligible for OPT.

I understand that my CPT authorization is based on enrollment. Any changes to enrollment could end CPT authorization immediately.

I will notify my international designated student official (DSO), Dr. Irvin Clark, if there are any changes to my employment (hours, location, duties, etc.) after CPT authorized. I must notify the DSO of any employment changes. This includes on-campus employment, additional hours, change of dates.

(If applicable) I am eligible and am participating in the [Career Center's Experiential Recognition Program](#). The Career Center will register me for SDS 3802 once I have approval from the DSO.

I am submitting a complete application (see list below) and understand that processing time is one week if the application is complete and the DSO doesn't need additional clarification on any information. All documents below must be submitted and filled out completely in order for DSO to start the process:

-Student Application Form (initialed and signed)

-Employment Verification Form (signed and filled out completely by your supervisor)

-Advisor Application Form for Thesis/Project/Dissertation Hours OR Advisor Application Form for Courses

Student Signature: _____ Date: _____

Bring all forms to the Designated Student Official Irvin Clark, EdD, iclark2@pc.fsu.edu (850) 770- 2101
Office of the Dean • Holley A-311-C • 4750 Collegiate Drive • Panama City • Florida • 32405-1099