



Curricular Practical Training Request Form

Student Information To be completed by the student

Family Name:	First Name:
Wheaton ID Number:	SEVIS ID Number:
Major /Department:	
Telephone:	Email:

Employment Information

Job Title:	<input type="checkbox"/> Part-time (20 hours/week or fewer) <input type="checkbox"/> Full-time (more than 20 hours/week)
Requested Start Date: (no earlier than the first day of semester's instruction)	Requested End Date: (no later than the last day of finals)
Company Name	
Company Address:	
Street:	City: State: Zip code:

I have read the CPT guidelines and understand that total employment (on and off campus) must not exceed 20 hours per week while school is in session.

Signature: _____

Date: (mm/dd/yyyy): _____

Academic Department Recommendation To be completed by the Faculty Advisor

Advisor's Name:	Department:
Telephone:	Email:
Student's Expected Program Completion Date:	
See the Wheaton Center for Global Education website for guidelines on CPT. For this CPT, the student is: <input type="checkbox"/> satisfying a degree requirement <input type="checkbox"/> receiving course credit in the following course (course number required):	
<i>By signing below, I confirm that this work experience is directly related to the student's academic program.</i> Optional Comments:	
Advisor's Signature:	Date: