

Curricular Practical Training Recommendation

To be completed by the Internship Faculty Supervisor and returned to IPO (drawer 202)

From _____
(print name of Internship Faculty Supervisor)

Student _____
(print name of student)

Major _____ Declared: Yes No

I have met with the above student and recommend Curricular Practical Training at (company name and address)

The position is to be authorized from ____/____/____ to ____/____/____
MM DD YY MM DD YY

The position is

- Part-time (no more than 20 hours per week)
- Full-time

In completing this employment opportunity, the student (choose one, please initial)

- [] Will receive credit for the course _____ (include course number and department)
 - To receive academic credit for an employment opportunity, you and the student must complete the [Internship Petition](#) from the Office of the Registrar and the student must register for the course.
- [] Is meeting a graduation requirement for their stated major
 - Please describe the requirement _____
- [] Is fulfilling the Immersion Experience requirement

I have verified that the employment is (please initial each one that is true)

- [] Designed and structured to enhance the student's educational program
- [] Is endorsed and will be monitored by the department
- [] Is directly related to the student's declared major (required, unless fulfilling the Immersion Experience)

Faculty Supervisor Signature _____

Department _____

Date _____