

**CURRICULAR PRACTICAL TRAINING RECOMMENDATION
FORM
Pacific School of Religion**

Student: Please complete the following (all fields are required):

Name: _____

Email Address: _____ Phone #: _____

Employer: _____ Employer's Address: _____

_____ City, State & Zip Code: _____

Job Title: _____

Starting Date: _____ Ending Date: _____ : Hours Per Week: _____

NOTE: the starting and ending dates of the CPT must fall within the dates of the semester

Description of Work to be Performed: _____

Employed on campus during the CPT period? No Yes

Position: _____ Number of hrs per week: _____

List previous semesters of CPT (both part-time and full-time)

Student's Signature: _____ Date: _____

Advisor: After verifying the above information, please complete the following: (this section cannot be completed by student!)

Course Name & Number for which student will be receiving credit (the course has to have an internship component): _____

Semester/Year in which the credit will be earned: Fall Spring

Summer Year: _____

Explain how this internship relates to the student's field of study and serves an academic purpose. If CPT will be applied toward thesis or dissertation credit, how is this a **necessary and required part** of the student's thesis/dissertation?

I certify that this internship is (please check ONE of the following):

required to complete the student's degree

required for report, thesis or dissertation

an integral part of an established curriculum (i.e., earning credit toward the degree program)

If none of the above applies, the student should discuss options other than CPT with the Coordinator for International Student Support [CISS].

Professor's Signature _____

Date: _____

Considering the number of hours to be worked and academic requirements needing to be met this semester, I certify that the student is making adequate academic progress

Advisor's Signature: _____ Date _____

