



**UNIVERSITY OF NORTHERN VIRGINIA**  
 7535 Little River Turnpike  
 Annandale, VA 22003

**Phone:** (703) 941-0949  
**Fax:** (703) 941-0893

## CPT Application Form

**SEVIS ID NUMBER:** \_\_\_\_\_

<b>Student and Program Information</b>		
		Student ID: _____
Student Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Date of Birth: _____ / ____ / ____	Phone Number: _____	
Degree Objective: <input type="checkbox"/> MAC <input type="checkbox"/> MBA <input type="checkbox"/> MED <input type="checkbox"/> MPA <input type="checkbox"/> MS <input type="checkbox"/> DBA <input type="checkbox"/> DED <input type="checkbox"/> DIT		
Concentration/Major: _____		

Please read and initial each of the following statements:

- \_\_\_\_\_ I have read the CPT guidelines as detailed in the current version the Handbook for Prospective and Current Foreign Students, released by the University of Northern Virginia, and understand and agree to compliance with all terms.
  
- \_\_\_\_\_ I understand that total employment (on- and off-campus combined) may not exceed 20 hours per week while school is in session.
  
- \_\_\_\_\_ I certify that all information and documents provided as part of the CPT application and checklist is true and accurate to the best of my knowledge.
  
- \_\_\_\_\_ I understand that knowingly falsifying information and intentionally misleading the University of Northern Virginia (UNVA) during any part of the CPT process may lead to disciplinary actions taken against me.

*My initials above and signature below confirm that I have agreed to abide all rules and regulations of UNVA and the CPT Program.*

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Name of Student	Signature	Date
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<b>CPT Employer Information</b>		
Company / Organization Name:		
Company Address:		
City:	State:	Zip Code:
Company Contact Person:		Phone Number:
Number of Hours Worked Per Week:	<input type="checkbox"/> <b>Full Time</b> (40 hours/ week) <input type="checkbox"/> <b>Part Time</b> (20 hours/week) <input type="checkbox"/> <b>Other</b> , specify: _____ / week	
CPT Start Date:        /        /	CPT End Date:        /        /	

<b>CPT Application Verification</b>	<b>Official Use Only</b>	
<b>Name of CPT Official</b>	<b>Signature</b>	<b>Date</b>
Please initial each of the following item to certify that they have been verified and are accurate:		
<input type="checkbox"/> Student has maintained the <b>F-1 status</b> for <b>one (1) year</b>		
<input type="checkbox"/> Cumulative GPA is <b>at least 3.0</b>		
<input type="checkbox"/> Student is registered for a <b>full-course load</b>		
<input type="checkbox"/> CPT Placement is <b>20 hours or less per week</b>		
<input type="checkbox"/> Work site is <b>within 250 miles</b> from the <b>University of Northern Virginia</b>		
<input type="checkbox"/> Student's address is <u>current</u> . If not, please attach <b>UNVA and USCIS Change of Address</b> forms		
The following documentation are attached:		
<input type="checkbox"/> CPT Application Form		
<input type="checkbox"/> Copies of the first and last page of passport		
<input type="checkbox"/> Copy of F-1 Visa		
<input type="checkbox"/> UNVA Form I-20		
<input type="checkbox"/> Copy of Job Placement Letter with Job Description		
<input type="checkbox"/> Employer Agreement for Participation in the UNVA Curricular Practical Training Program		
<input type="checkbox"/> Copy of Job Placement Letter with Job Description		