

To the Office of International Affairs  
University of Chicago

Dear International Student Adviser:

With this letter I recommend that you authorize the University of Chicago F-1 international student named below to participate in Curricular Practical Training (CPT) as described.

Name of student:

Field of study:

Name of employer:

Address of employer:

Number of hours per week:

Precise dates (mm/dd/yyyy) of training: From \_\_\_\_\_ To \_\_\_\_\_

I confirm that the above named student's degree conferral is dependent on satisfactory completion of the internship outlined above. After reviewing the goals and details of the proposed employment, I've determined that the activity meets the degree requirements for the student's program. The amount of time requested above is necessary to complete the internship requirement.

Approved Degree Program:

Additional information or conditions (optional):

Sincerely,

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Signature of the Dean of Students responsible for degree program

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Dean of Students printed name

Date: