



CURRICULAR PRACTICAL TRAINING (CPT) REQUEST FORM

Part I: To be completed by STUDENT

LAST NAME FIRST NAME Panther ID: _____

Degree Level: Bachelor's Master's Doctorate Other

Employment Start Date: ___/___/_____ (MM/DD/YYYY) Number of hours I will work each week _____

Part II: To be completed by ACADEMIC ADVISOR

Student's expected completion date: (Month) _____ (Year) _____ Cumulative GPA: _____

The student has completed _____ credits and needs to take _____ additional credits in order to graduate.

Hospitality Management ONLY: Has the student's Basic Training been completed and/or waived? YES NO

The above student must be enrolled in an internship, co-op or practicum course offered in his/her academic program - credits will apply toward the student's degree audit and program completion.

Term	Year	Credit Hrs	Course Number	Course Title
Employment Details				
Employer (Company Name):			Supervisor:	
Street Address:				
City:		State:		ZIP Code:

I confirm that as the appropriate departmental representative the internship credits listed above are either:

- A **required** part of the student's established curriculum; the student must participate in the internship to complete his/her degree program requirements and to graduate.
- An **integral** part of the established curriculum, taken as an elective and the credits are required to graduate.

Academic Advisor's Signature

Name (Print) _____ Title _____

Department _____ Phone _____ E-Mail _____

Signature _____ Date _____

** CPT in last semester –including summer- CPT location must be in South Florida. Student must enroll in a semester long in-person class or credit e.g. session C or session A and B combined. form effective 5/02/2024tr