



Request for Curricular Practical Training

Date: _____

Family Name: _____ First Name: _____

Address: _____

Email: _____

Phone: _____

What is your department of study: _____

Undergrads: Do you have a major: _____ minor: _____

What degree do you expect to receive at EMU: _____

Applying for work authorization, proposed dates of employment:

From _____ To _____ Full-time/Part-time

Previous Employment Authorization while on F-1 status: write in dates below

Practical Training: Optional (OPT) _____ during or after Bachelors/Masters

Curricular (CPT) _____

Severe Economic Hardship: _____

Additional SEVIS data:

SSN or ITIN#: _____

Driver's License #: _____ Issuing State: _____

IMPORTANT: By Law, Changes of Address and Status must be reported to ISS within 10 days. You may email changes to iss@emu.edu or bring changes in writing to ISS.