



INTERNATIONAL STUDENT INTERNSHIP & CO-OP ACKNOWLEDGEMENT FORM

International students may participate in either on-campus or off-campus internship opportunities during their studies at SUNY Oswego. Please read this form carefully. All students must complete the **PHYSICAL ADDRESS** section. Then, depending on the type of internship you will be participating in, complete either the **ON-CAMPUS INTERNSHIP** or the **OFF-CAMPUS INTERNSHIP (CPT)** section of this form to indicate your understanding of the statements below and your agreement to abide by them.

Submit your signed Acknowledgement Form to iss@oswego.edu so that the International Student & Scholar Services Office may review the details of this opportunity before countersigning. The international advisor as mentioned below is a member of the International Student & Scholar Services Office (Maria Kopnitsky, Hanna Lee), **not** your academic advisor.

A. PHYSICAL ADDRESS: Where you are physically located during your internship period dictates if you will need Curricular Practical Training authorization or not. Most internship/training experiences do **not** require CPT authorization if you are physically outside of the United States while you are participating in them. All other experiences, even if performed remotely, **require** CPT authorization. So, please indicate where you will be residing during this experience:

- **INSIDE USA:** I will be in the United States for the duration of this training experience, at this address: _____
- **OUTSIDE USA:** I will be residing outside of the United States for the duration of this training experience, at this address: _____

B. ON-CAMPUS INTERNSHIP

Complete this section **only** if you will be participating in an **on-campus** internship.

- I understand that the total hours of my on-campus work at SUNY Oswego - including this internship experience, whether it is paid or unpaid - cannot exceed 20 hours per week while school is in session. I am also aware that my Form I-20 will be terminated if I exceed this 20-hour per week limit;
- I acknowledge that I cannot continue to participate in this internship or any other on-campus work after the program end date indicated on my Form I-20 (in other words, my graduation or transfer date). For possible exceptions to this rule, please contact iss@oswego.edu;
- I understand that my ability to participate in this internship and other on-campus work ends if I fail to maintain my F-1 immigration status.

I acknowledge that I have read the statements above and agree to abide by them:

Student's name:

Student's signature:	Date (mm/dd/yyyy):

International advisor's name:

International advisor's signature:	Date (mm/dd/yyyy):



C. OFF-CAMPUS INTERNSHIP (CPT)

All international students who intend to participate in any sort of off-campus practical training during the course of their studies must abide by all rules associated with Curricular Practical Training (CPT) in order to maintain their F-1 student visa status. Please read each of the statements listed below carefully. **Complete this section only if you will be participating in an off-campus internship.**

- I understand that engaging in off-campus employment outside of the CPT authorization period without prior approval by SUNY Oswego's International Student & Scholar Services Office is considered **illegal employment** and is therefore a violation of my F-1 status that may result in the **termination** of my SEVIS record (I-20).
- I understand that my CPT experience must be **directly related to my major area of study** and an **integral** part of my program's established curriculum.
- I understand that I am only eligible to engage in CPT employment during the CPT authorization period indicated at the top of page 3 of my new Form I-20 issued by the International Student & Scholar Services Office for my CPT experience.
- I understand that while on CPT, I am only eligible to work for the employer indicated in the CPT authorization on page 3 of my I-20.
- I understand that I must maintain **full-time enrollment status** throughout the duration of my program of study including while engaging in CPT.
- I understand that I must report all changes of address to the International Student & Scholar Services Office at iss@oswego.edu within 10 days of the move so that they can update my SEVIS record.
- I understand that I must immediately report any **termination** of my CPT employment to the International Student & Scholar Services Office so that an updated I-20 can be issued.
- I understand that if I wish to change CPT employers I must repeat the CPT application process through the EXCEL Office and obtain a new Form I-20 authorizing CPT with the new employer from the International Student & Scholar Services Office prior to beginning the new CPT experience.
- I understand that if I wish to extend my current CPT experience, I must submit an updated Request for Experience, a completed Learning Agreement in hireOz by Handshake, a Recommendation Letter for Curricular Practical Training (CPT) from my academic advisor, enrollment verification, and an unofficial transcript indicating that the CPT experience has been registered for credit. I understand that I must receive my new I-20 indicating the extended CPT period before I can continue working.
- I understand that if I exceed 365 days of full-time CPT, I will **no longer be eligible** for Optional Practical Training (OPT).
- I understand that my passport must be valid at the time of CPT authorization and it is my responsibility to maintain passport validity throughout the duration of my program of study.
- I understand that I am responsible for maintaining health insurance coverage for myself and my dependents while engaging in CPT.

I acknowledge that I have read the statements above and agree to abide by them:

Student's name:

Student's signature:

Date
(mm/dd/yyyy):

International advisor's name:

International advisor's signature:

Date
(mm/dd/yyyy):