<u>University of Connecticut, International Student and Scholar Services - CPT Employer Addendum</u>

Form Instructions to employer: Please update all sections in bold and complete required questions. Sign to acknowledge understanding of the terms of CPT work authorization. Electronic signature is acceptable if it is a reproduction of an actual signature, drawn with a tool, or is a time-stamped electronic signature.

Part 1:		
This form is an addendum to the offer	r already extended to	STUDENT'S NAME
for the temporary position of	STUDENT's TITLE fo	or the internship dates of
		g employment or training name and
location		AME AND ADDRESS OF EMPLOYER.
The student will work (choose one):		
20 hours per week or les	s	
More than 20 hours per	week	
Part 2:		
The student will be authorized to con Training (CPT) authorization of the F-2 and Scholar Services (ISSS) office at th	1 student visa, which will be pro	ovided by the International Student
 requirements of an academic The terms of the student's en ensure they meet eligibility for notify the student if any adjus The University of Connecticut lists the student's Curricular Fauthorized to work according work hours). The student's internship expension 	or the Curricular Practical Training stments to the terms are needed will issue the student's work at Practical Training authorization, to the conditions noted on the erience will be evaluated by a Unwith the student) to ensure that	the student's degree program. ours) will be reviewed by ISSS to ng work authorization. ISSS will d, to be eligible for CPT. uthorization on a Form I-20 that and the student will only be
Employer Acknowledgment:		
I am aware that the student's em Training (CPT) work authorization	•	ough the Curricular Practical
Name:	Title	:

Email address:

Signature: