

Use this form for all internship program registration requests **Please complete this form in <u>pen or electronically</u>**

Student Information

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Name:														
ID#:					Class Level:			Cla	ass Leve	el:				
Internship Term: Fall				Winter Spring				Summer *	(tuition	n charg	ed pe	er		
(Please	e circle & indicate y	ear)								credit)				
Major: Minor 1:				Minor 2: Minor				<mark>Minor</mark>	<mark>3:</mark>					
Name	Name of Internship Site:													
Internsh	nip Title: (no more tha	n 27 cha	aracters)											
	est for which you are seeking of the	credit – Ex	HHP, BUS, etc.)			<mark>Cred</mark> i	<mark>it Hour</mark>	rs Re	equest	t <mark>ing: (Circl</mark>	<mark>e One</mark>))		
	Course Level:	107		1=	1= 39 hrs of on-site 2			2=7	2=78 hrs of on-site			3= 117 hrs of on-		
	Course Level:	497			work				woi	rk	site work			
Student	Responsibilities: Compl	lete the o	application pro	cess an	d submit d	Ill signed	documer	ntatio	n to the	CEL by deadli	ine*			
1.	Complete Student Lea													
2.	Contact host agency t													
3.	activities, projects, mo Meet with Academic	-	-			-				-	isor mus	st sign a	ana aa	ite.
3. 4.	Meet with Faculty Spo				• •		•	•	•	••	rnship cr	redit an	d get	
	signed approval.													
5.	Get Department Chai	r Signatı	ure.											
6.	Meet with Internation	nal Stude	ent Coordinato	r to dis	cuss Curri	cular Pra	ctical Tra	ining	g (CPT) a	nd Optional F	Practical	Trainin	ig (OP	Т)
	and I-20 guidelines. IS	•			•	•								
			weekly log to c	locume	nt hours v	vorked p	er week.							
_			e full time CPT				/o=: ·!!				,			
7.	Return completed do			for Exp	eriential	.earning.	(CEL WIII	subr	nit form	s to Registra	r's office	for cou	irse ci	redits
	to be billed to student account) <u>Note: All internships must be registered and billed for the term in which they are being performed.</u>													
8.														
*														
*	······································													
*														
	responsibilities to be performed prior to beginning the internship.													
*	Complete the internsl	• •		-		-		s spec	cified.					
*	Maintain full confider	•		••	•	Ũ	•							
*	Report physical, safet	y or per	sonnel problen	ns to th	e host age	ency supe	ervisor ar	nd to	your su	pervising facu	ulty.			



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1. Learning Objectives: What new Learning (information, skills, experience) will you gain during your internship? Please explain how this experience directly correlates with your academic studies and include how it will enhance your curriculum knowledge and shape your career goals.

Confidentiality Agreement

I recognize that my College of Idaho internship host agency may reveal proprietary information to me in the process of allowing me access to information during my internship. I promise that I will not reveal any secret, confidential, or proprietary information I may gain about my host internship agency. If I am not sure the information should be confidential, I will assume that it is and will not reveal it to people outside the host agency, and/or I will not use it for my own personal gain.

I recognize and acknowledge that I have moral, ethical and legal obligations to keep the host agency's business information confidential, and I acknowledge that I understand that if I violate this obligation in and substantive manner that causes damage to the host agency of The College of Idaho, the host agency and The College of Idaho may take legal action against me for violating this confidentiality agreement.

Student Signature:

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Date:



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Curricular Practical Training (CPT):

According to federal regulations (8 CFR, 214.2(f)): CPT is a type of off-campus employment authorization which permits international students in F-1 status to fulfill their degree program requirement. It is important to understand that CPT can only be used for "an integral part of an established curriculum." (214.2)

- The College of Idaho defines "integral" as bearing credit. In order for an internship to qualify, it must be deemed academic and receive sponsorship from an academic department. Once you have secured an internship, and academic sponsorship you can file for CPT.
- Part-Time CPT is defined as being less than 20 hours of work per week. Full time CPT is defined as 20 or more hours.

Eligibility:

- Student must have been a full-time student for at least a year
- Student needs to maintain full time academic status during CPT
- Student must be receiving academic credit for the internship
- Internship must be affiliated with student's declared major or a requirement of their minor that is necessary for degree completion

Student Acknowledgement (Please check all demonstrating your understanding)

	understa	nd that I	must fill o	out the	form co	ompletely	and clea	rly with	all en	nploye	rs' inforr	nation be	efore submi	tting to The
C	enter for	Experier	itial Learr	ing.										

- □ I understand that my CPT participation must fulfill a specific academic objective to fulfill my degree program requirements.
- □ I understand that my CPT starting date must be consistent with the term start date and that the internship must be completed by the end of the academic term.
- □ I understand when there is an early training requirement that I need a written explanation from my employer in order to have an early CPT employment start date. This request must be approved by The CEL and The International Student Coordinator.
- □ I understand that any CPT employment end date adjustment has to be approved by The College of Idaho in writing first. Upon approval by the College, further adjustments can be made.
- □ I understand that my authorization is limited to the employment as outlined in the internship application.
- □ I understand that I must promptly update The CEL and International Student Coordinator of any employment interruptions and/or changes while on CPT.
- □ I understand that the CEL and International Student Coordinator may request additional information at any time.
- I understand that the CEL and International Student Coordinator require my paperwork to be submitted before the internship deadlines and that I must wait to begin participating until both course registration and the 1-20 update process has been completed.
- I understand that I may only start CPT employment after my CPT application has been approved, and I have been issued a new I-20 (needed to be picked up or received from the ISC Coordinator).
- **Failure to comply with the above could result in the immediate termination of my I-20**

By signing below, I verify that I understand the above rules and regulations pertaining to my CPT authorization and I confirm that I will consult with The CEL is I am clear about my rights and requirements pertaining to my employment.

Last Name (As it appears in passport):	First Name:	
Student Signature:		Date:

*Deadline for submitting forms is one week prior to official drop/add deadlines for processing time:



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Internship Site Information

Host Supervisor Signature:

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Organizat	ion Name:								
Street:			City:		State:	Zip:			
Superviso	or Name:		Supervisor Title	e:					
Superviso	or Email:		Supervisor Pho	ne:					
Start Dat	e: End Date:	Part time		Paid	Internship:	Yes or No			
		Full time		For-Profit: Yes or		Yes or No			
tr	2. Internship Site Information (job responsibilities, tasks and learning opportunities. Include activities, projects, meetings, trainings, etc)								
	Supervisor Respons								
 Interview prospective internship candidates to insure good match between the student and the host agency Design a one-semester, individualized internship experience, in conjunction with the student and the faculty supervisor that is relevant to the student's academic program, in cooperation with The College of Idaho to insure compliance with Curricular Practical Training regulations. 									
Provide the student with a thorough orientation to the host agency's administrative policies, standards and practices, including safety training.									
✤ With the	e student, establish hours, loca				-	nning work.			
Contact	 Designate an on-site mentor to provide quality and experienced supervision of the student Contact the CEL to inform the director if there is a problem or if in the event that it becomes necessary to terminate the student, provide reasons for such action. 								
	e a performance evaluation at								
Sign the student's weekly log to verify both the weekly hours worked and the cumulative hours performed for the performed for the term.									

Date:



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C of I Academic and Department Information

4. Advisor: Discuss academic fit for proposed internship									
Academic Advisor Signature:					Date:				
5. Faculty Sponsor: (<i>Determine</i> Handbook max sponsorships not to exce									
 Supervising Faculty Member's Responsibilities: Communicate and consult with the host agency and student to facilitate an internship that has academic merit and that allows for a solid practical learning experience. Approve and complete the internship application after reviewing the completed sections submitted by the host agency and student. Assume general responsibility for academic instruction, advising and evaluation of the internship In a timely manner, respond in partnership with the CEL to any complaints concerning the student Evaluate and determine a grade for the internship according to established learning outcomes. 									
Faculty Sponsor Signature:			Faculty Name Printe	d:	Date:				
Department Chair Signature:					Date:				
6. International Student Co	oordinator: Discuss Cur	ricular I	Practical Training (CP1	⁻) and I-20	guidelines.				
Students must pick up new I- 20 fro									
(*all internships must be registered					.				
International Student Coordinator S	ignature:				Date:				
CEL Signature:	Date:								
Registrar Receipt Stamp:	ID#:	Class	Standing:	Credits	Enrolled				
	Grad App: Y or N	GPA o	over 3.5: Y or N	Faculty	Wkld:				
	Holds:								