

## Randolph College

### Curricular Practical Training (CPT) Request Form with Faculty Sponsor/Department Certification

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Major(s): \_\_\_\_\_

How is this internship experience related to your major? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of credit hours: \_\_\_\_\_

Full-time CPT or Part-time CPT (20 or fewer hours per week): \_\_\_\_\_

Starting Date: \_\_\_/\_\_\_/\_\_\_ (mm/dd/yyyy) Ending Date: \_\_\_/\_\_\_/\_\_\_ (mm/dd/yyyy)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Submit to the Career Development Center

#### FACULTY SPONSOR/DEPARTMENT CERTIFICATION

I verify that an internship is an integral part of this student's established curriculum. If the student is in the first year of graduate school, I verify that this internship is a required part of the established curriculum.

##### *Faculty Sponsor/Instructor*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

##### *Faculty Advisor*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_