

Student Experiential Education Agreement Information and Instructions

This document is the Cooperative agreement between the school and employer to approve CPT that USCIS requires. You must keep this document for your personal records and complete a new agreement using the most current document in the CPT application for each CPT authorization you apply for. USCIS will ask for this document if you apply for OPT or H1B visa.

If you do not have this document, or the letter alternative acceptable by USCIS, you may be denied OPT, H1B, or any other visa you apply for in the future. Make sure you save all agreements from all employers, even if you cancel your CPT before you start working.

You must upload all pages of the agreement into your application with your signature and your employer's signature. The following people may sign this document:

- Direct Supervisor
- Employee who signed your Job Offer Letter
- Head of your Department
- HR representative

Note on Acceptable Signatures: Students and employers may physically sign the Form or input their own electronic signature. USCIS accepts electronic signatures in the following formats:

- Electronic signatures using software programs or applications. Students and employers may sign all signature fields on the Form using electronic signatures produced with software programs or applications.
- Electronically reproduced copies of a signature. Students and employers may sign all signature fields on the Form using digitally reproduced copies of a signature. A digitally reproduced copy may be a scanned image of a physical signature. **It CANNOT be a screenshot of a signature from a different document.**

Note on work hours: If at any time during your CPT authorization you will work more than 20 hours per week, you must apply for Full-Time CPT. Any work over 20 hours in a single week while authorized for Part Time CPT is unauthorized and will cause you to be out of status.

Please find below a detailed explanation of what information should be written in each requested information section on Page 3. If you have any further questions, please contact

PracticalTraining@trine.edu

Please understand that you are responsible for keeping this document. Trine University is not responsible for keeping copies of this document and cannot be held accountable if you do not have the document should USCIS request it.



**Trine University
Student Experiential Education Agreement**

Student Name:	Legal Name as written on I20
Program of Study:	MBA - MSBA - MSEM - MSIS - DIT
Email Address:	Trine Student Email
Phone Number:	Personal U.S. Phone Number
Employer:	Company Name on Offer Letter
Employer Address:	Company Address
Site Supervisor:	Name of Direct Supervisor
Supervisor Title:	Job Title of Direct Supervisor
Supervisor Phone Number:	Phone Number + Extension to Direct Supervisor
Supervisor Email:	Direct Supervisor's Work Email
Work Hours Per Week:	Full Time (over 20 hours) or Part Time (20 hours or less)
Requested CPT Authorization Dates:	Requested Start Date on CPT Application - Requested End Date on CPT Application
Rate of Pay (if applicable):	Optional

Trine University Representative Contact Information:

Hannah Ewing
 Senior Director of International Services & Operations
 Office of International Services
 Trine University
 1 University Ave Angola, IN 46703

Trine University