

# CPT AUTHORIZATION FORM (MUSIC STUDENTS ONLY)

## THIS SECTION MUST BE COMPLETED BY THE STUDENT

Last Name:	First Name:	PID #: A	<input type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> Doctoral <input type="checkbox"/> Certificate
MSU E-mail:	Phone:		
Current U.S. Address:			
City:	State:	Zip Code:	
Semester Applying for CPT: _____ (This CPT authorization form is valid until last day of final exams as listed on <a href="#">academic calendar</a> )			
<p><b>ACKNOWLEDGEMENT OF MAINTAINING STATUS:</b></p> <p>PLEASE INITIAL EACH OF THE FOLLOWING STATEMENTS:</p> <p>_____ I understand that I must complete two academic semesters before I am eligible to apply for CPT.</p> <p>_____ I am aware that engaging in any employment, training or performance before obtaining the CPT authorization I-20 will result in termination of my status.</p> <p>_____ I understand that I am ineligible for CPT after the completion of the public performance of the Lecture-Recital.</p> <p>_____ I understand that going over the weekly limit on employment hours may result in termination of my status</p> <p>_____ It is my responsibility to provide OISS a complete CPT packet with completed CPT form, original passport, I-20 and all additional documents when adding a new employer and/or when requesting new or additional dates.</p> <p>_____ I acknowledge that I will keep all CPT documents including copies of I-20s and offer letters. If the U.S. government requests these documents, I am responsible for providing the required documents.</p>			
Student's Signature: _____			Date: _____

## THIS SECTION MUST BE COMPLETED BY THE ACADEMIC OR GRADUATE ADVISOR

**This CPT is an Integral Part of the Student's Curriculum.** The student will be receiving course credit(s) that will count as part of the student's major of study as listed on the I-20.

<b>Undergraduate Expected Completion Date</b> (Students are ineligible for CPT after this date)	
<b>Graduate Expected Completion Date</b> (Students are ineligible for CPT after the public performance of the Lecture-Recital)	
<b>Semester Applying for CPT</b> (Example: Spring 2020)	
<b>Course Name &amp; Number</b>	
<b>Number of Credits</b>	

**Explain how this CPT is directly related to the chosen course in the student's major and field of study.**

This student is pursuing a \_\_\_\_\_ degree in \_\_\_\_\_ and has accepted a position that advances their studies/skills and includes one or more of the following activities:

<input type="checkbox"/> Orchestral member	<input type="checkbox"/> Artist-teacher	<input type="checkbox"/> Accompanist
<input type="checkbox"/> Conducting/Composing	<input type="checkbox"/> Vocalist	<input type="checkbox"/> Arts Administration

<b>Name (print):</b> Susan Hoekstra/David Rayl/ Michael Kroth	<b>Title:</b> Graduate Advisor/ Associate Dean
<b>Department:</b> College of Music	<b>E-mail:</b> musgrad@msu.edu
<b>Academic or Graduate Advisor Signature:</b>	<b>Phone:</b> 517-353-9122
	<b>Date:</b>