

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 academic calendar)			

ACKNOWLEDGEMENT OF MAINTAINING STATUS:

PLEASE INITIAL EACH OF THE FOLLOWING STATEMENTS:

- ____ I understand that I must complete two academic semesters before I am eligible to apply for CPT.
- ____ 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.
- ____ I understand that I am ineligible for CPT after the completion of the public performance of the Lecture-Recital.
- ____ I understand that going over the weekly limit on employment hours may result in termination of my status
- ____ 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.
- ____ 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.

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.

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

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 |

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

SAMPLE



Requirement # 1 Letterhead

East Lansing Symphony
427 N. Shaw Lane RM 105,
East Lansing, MI 48824/ 517-000-0000

19 January 2020

John Doe-Smith
420 Harrison St, Apartment 105
East Lansing, MI 48824

Dear John Doe-Smith,

With this letter I offer you an engagement as Orchestral Keyboard Musician, at the East Lansing Symphony, for the International Student Festival Orchestra's performances of Spartovsky's complete Falcone Song. The keyboard is a Kawai ES8, to be provided by the Office for International Students (OISS). Per your Curricular Practical Training (CPT) requirements, please see the information below.

- **Job Title:** Orchestral Keyboard Musician
- **Start Date of Employment:** February 14, 2020
- **End Date of Employment:** February 17, 2020
- **Wage/salary/remuneration:** \$25/Hour
- **Number of hours:** Max of 10 hours per week. The engagement includes:
 - A rehearsal service, with double overtime pay:
 - February 10, 2020 from 5:00-9:00 PM
 - The performances include three shows:
 - Saturday, February 11, 2020, at 2:00 PM– 4:00 PM
 - Saturday, February 12, 2020, at 7:30 – 9:30 PM, and
 - Sunday, February 13, 2020, at 2:00 – 4:00 PM
- **Full Address of Employer:** The performances and rehearsal will take place at:
 - the Sparty Center, 427 N. OISS St., Lansing, MI, 48911
- **Description of work (duties performed):** Your duties include playing keyboard musician, at principal scale, for The International Student Festival Orchestra's performances of Spartovsky's complete Falcone Song.

Requirements # 2 –3
#2 Job title

#3 Start/End Date:

If the end date detailed on your offer letter goes beyond the last day of the semester, you may need a new CPT authorization form and supporting documents

Requirements # 4 – 5

#4 Wage,

#5 Number of hours per week: A specific number of hours per week is required.

Requirements # 6 – 7

#6 address: If rehearsals and performances are being performed in a different location, a detailed address for each location is required & # 7 Description of work

Warm regards,

Requirements # 8: Signed by employer

Nancy S Rad
Artistic Director
NancyS@radmusic.com

EAST LANSING SYMPHONY. 427 N SHAW LANE, ROOM 105
INTERNATIONAL CENTER. OISS.MSU.EDU

[\(/default.aspx\)](#)
OFFICE OF THE REGISTRAR

Schedule Builder

Student Number (PID):

A3531720

Student Name:

John Doe Smith

Term

Spring 2020

SAMPLE

[Log Out](#)

Enrolled Courses for Spring 2020

Course	Section	Actions	Status	Credits	Title	Days	Times	Location	Instructor
MUS 996	001	X Drop	Enrolled	1	Doctoral Recital Performance	-	-	-	D. Moriarty

Total Enrolled Credits: 1

Planned Courses for Spring 2020

You have no Planned Courses

Call us: **(517) 355-3300**

[Contact Information \(/contact.aspx\)](#) | [Site Map \(/sitemap.aspx\)](#) | [Privacy Statement \(/privacy.aspx\)](#) |

[Site Accessibility \(/siteaccessibility.aspx#\)](#)

Call MSU: (517) 355-1855 | Visit: msu.edu (<http://msu.edu>)

MSU is an affirmative-action, equal-opportunity employer. Notice of Nondiscrimination (<http://oie.msu.edu>)

SPARTANS WILL. | © Michigan State University

A printout of the electronic I-94 screen from CBP website: www.cbp.gov/I94
An I-94 is required when applying for CPT



Most Recent I-94

Admission (I-94) Record Number: [REDACTED]

Most Recent Date of Entry: 2016 August 10

Class of Admission: F1

Admit Until Date: D/S



Details provided on the I-94 Information form:

Last/Surname: [REDACTED]
First (Given) Name: [REDACTED]
Birth Date: [REDACTED]
Passport Number: [REDACTED]
Country of Issuance: [REDACTED]

I-94 Card: Some students may receive an I-94 card.

Departure Number: 739090487
OMB No. 1651-0111

I-94
Departure Record

14. Family Name: [REDACTED]
15. First (Given) Name: [REDACTED]
16. Birth Date (Day/Mo/Yr): [REDACTED]
17. Country of Citizenship: [REDACTED]

CBP Form I-94 (10/04)
See Other Side STAPLE HERE

SEVIS ID: N0004705512

SURNAME/PRIMARY NAME Doe Smith	GIVEN NAME John	CLASS F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME John Doe-Smith	PASSPORT NAME	
COUNTRY OF BIRTH CANADA	COUNTRY OF CITIZENSHIP CANADA	
DATE OF BIRTH 01 JANUARY 1980	ADMISSION NUMBER	
FORM ISSUE REASON INITIAL ATTENDANCE	LEGACY NAME John Doe-Smith	

SCHOOL INFORMATION

SCHOOL NAME Michigan State University	SCHOOL ADDRESS 427 N Shaw Lane, Room 105, East Lansing, MI 48824
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL SPARTAN SPARTY PDSO	SCHOOL CODE AND APPROVAL DATE DET214F0006000 03 APRIL 2015

PROGRAM OF STUDY

EDUCATION LEVEL DOCTORATE	MAJOR 1 Music Performance, General 50.0903	MAJOR 2 None 00.0000
NORMAL PROGRAM LENGTH 72 Months	PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient
PROGRAM START DATE 01 SEPTEMBER 2015	PROGRAM END DATE 31 MAY 2021	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 23,000	Personal Funds	\$ 3,000
Living Expenses	\$ 7,000	Scholarship and Teaching Assistantship	\$ 29,000
Expenses of Dependents (1)	\$ 00	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
TOTAL	32,000	TOTAL	\$ 32,000

REMARKS

SAMPLE

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

<input checked="" type="checkbox"/>	DATE ISSUED	PLACE ISSUED
SIGNATURE OF: Spartan Sparty, PDSO	21 April 2015	East Lansing, MI

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

<input checked="" type="checkbox"/>	SIGNATURE OF: John Doe Smith	DATE
<input checked="" type="checkbox"/>	SIGNATURE	ADDRESS (city/state or province/country)
NAME OF PARENT OR GUARDIAN	SIGNATURE	DATE

SEVIS ID: N0004705512 (F-1)

NAME: John Doe Smith

EMPLOYMENT AUTHORIZATION

EMPLOYMENT STATUS	TYPE
EMPLOYMENT START DATE	EMPLOYMENT END DATE
EMPLOYER NAME	EMPLOYER LOCATION
COMMENTS	

CHANGE OF STATUS/CAP-GAP EXTENSION

REQUESTED VISA TYPE	REQUEST/PETITION STATUS	RECEIPT NUMBER	BENEFIT START DATE/REQUEST DATE
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EVENT HISTORY

EVENT NAME	EVENT DATE
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OTHER AUTHORIZATIONS

AUTHORIZATION	START DATE	END DATE
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TRAVEL ENDORSEMENT

This page when properly endorsed, may be used for reentry of the student to attend the same school after a temporary absence from the United States. Each certification signature is valid for one year.

SCHOOL OFFICIAL	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		

Sample

INSTRUCTIONS TO STUDENTS

STUDENT ATTESTATION. You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

FORM I-20. The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

VISA APPLICATION. You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

ADMISSION. When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA. Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

EMPLOYMENT. Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

PERIOD OF STAY. You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

EXTENSION OF PROGRAM. If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

SCHOOL TRANSFER. To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

NOTICE OF ADDRESS. When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

REENTRY. F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL. DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

PENALTY. To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

ISSUANCE OF FORM I-20. DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

ENDORSEMENT OF PAGE 2 FOR REENTRY. If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

RECORDKEEPING. DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

AUTHORITY FOR COLLECTING INFORMATION. Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

REPORTING BURDEN. U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of the Chief Information Officer/Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 I Street NW Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.