

STUDENT CURRICULAR PRACTICAL TRAINING (CPT) PLACEMENT COOPERATIVE AGREEMENT

This Agreement establishes and documents a cooperative education relationship, within the meaning of 8 C.F.R. § 214.2(f)(10)(i), between the Institute and the Host Organization/Employer for the purpose of providing an eligible F-1 student with practical training experience that is an integral part of the established curriculum for the degree program in which they are enrolled (“Curricular Practical Training” or “CPT”).

Student Name (“Student”)	
SEVIS ID	
MIT Degree Program / Major	
Subject(s)/Course(s) to Which Training Is Integral	
Credits/Units Assigned to the Subject(s)/Course(s)	
Host Organization / Employer Name	
Employer Site / Training Activity Address (including City/Town, State, Zip/Postal Code)	
Training Start and End Dates	
Full-Time or Part-Time / # hours per week	
Position Title	
Training Supervisor Name, Title, Email, Phone Number	

Description of Training, Duties, and Learning Objectives

Certification of Curricular Integration (University / DSO)

I certify that the training described above is an integral part of the student's established curriculum, and that this placement is not being authorized solely for the purpose of employment.

MIT Academic Program/

Department Signature: _____
(Undergraduate/Graduate Administrator or Officer, or Department Head)

Date: _____

MIT DSO Signature: _____
(MIT International Students Office)

Date: _____

Acknowledgment of Terms

- (a) The Employer confirms that it will provide sufficient supervision and periodic evaluation of the Student. The Employer confirms that the duties and responsibilities of the Student in this placement will not deviate substantially from the training and learning objectives identified herein. The Employer confirms that the Student will remain subject to MIT Policies & Procedures during CPT, including but not limited to MIT P&P Section 13.1 (Intellectual Property).
- (b) Each Student is responsible for obtaining CPT authorization and an endorsed Form I-20 from the DSO **before** beginning training, for complying with the Employer's workplace policies, and for promptly reporting to the Institute any change in the terms of their placement.
- (c) The Student confirms that he or she has received CPT authorization and an endorsed Form I-20 prior to the Training Start Date listed above. The Student confirms that he or she understands that any unauthorized employment or a material change in the terms of this placement may jeopardize the Student's F-1 status.

Student Signature: _____

Date: _____

MIT Academic Program/

Department Signature: _____
(Undergraduate/Graduate Administrator or Officer, or Department Head)

Date: _____

Host Organization/

Employer Signature: _____

Date: _____

MIT DSO Signature: _____
(MIT International Students Office)

Date: _____