

SAMPLE JOB OFFER LETTER
for F-1 Curricular Practical Training

Company/Organization Letterhead

[DATE]

[STUDENT'S NAME]

[STUDENT'S ADDRESS]

[STUDENT'S CONTACT INFORMATION]

Dear [STUDENT'S NAME],

We are very pleased to offer you the position of [JOB TITLE] with [COMPANY NAME]. Please find the following confirmation of the specifics of your work:

Position Title: Accounting Assistant

Start Date: (First day of quarter)

End Date: (Last day of the quarter)

Number of Work Hours Per Week: 20 hours (max)

Salary (optional):

Supervisor: You will be reporting to [SUPERVISOR'S NAME and TITLE].

[Supervisor's Contact Information] may be contacted by phone at (xxx-xxx-xxxx) or by email (xxxxxxx@xxx.com).

Responsibilities: Your day-to-day responsibilities will include the following:

- Developing online marketing resources (webpages, videos, slideshows) for products
- Create sales presentations and surveys for prospective clients.
- Work with department managers to analyze marketing resource effectiveness.
- Attend weekly working group staff meetings.

(Examples of duties and responsibilities)

Office Location: You will be working in our branch office at [Company Location].

Should you have any questions regarding the specifics of your internship, please contact me by phone (xxx-xxx-xxxx) or by email (xxxxxxx@xxx.com),

Sincerely,

[Signature over Supervisor's Printed Name and Title]

All fields in **RED ink** are **REQUIRED** to be provided while fields in **BLUE ink** are **OPTIONAL**



**CALIFORNIA TRINITY
SCHOOL OF BUSINESS**

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CURRICULAR PRACTICAL TRAINING (CPT) COOPERATIVE AGREEMENT

International students in F-1 status are allowed to be employed in the United States under Curricular Practical Training (CPT) as long as the employment is an integral part of an established curriculum. This Cooperative Education Agreement provides training objectives agreed upon by the employer, faculty advisor, and student and facilitates the authorization of CPT for the period requested. Responsibilities include:

- Employer** Provide on-site supervision and appropriate work and training opportunities, including an evaluation of the student's work.
- Student** Adhere to all employer policies and fully participate in the learning objectives.
- Faculty Advisor** Provide guidance and instruction as necessary.

***Provide all information on the form itself. Do NOT attach documentation in lieu of completing some or all of the agreement.**

STUDENT INFORMATION

Name: _____ Student ID: _____

Phone Number: _____ E-mail: _____

ACADEMIC/EMPLOYMENT INFORMATION

Students must enroll in a full course of study and the CPT course, MA 750 before submitting/uploading their CPT Cooperative Agreement.

Course/Title: **MA 750 Curricular Practical Training**

Instructor/Faculty Advisor: **Alex Sherm, Ph. D, MS**

Company Name: _____

Paycheck Issuing Company (*if different from above*): _____

Company Address (site of CPT): _____

Supervisor Name: _____ Supervisor Title: _____

Phone Number: _____ E-mail Address: _____

Number of Hours per Week (max 20 hours): _____ Pay rate (\$/hr): _____

Start Date (mm/dd/yyyy): _____ End Date (mm/dd/yyyy): _____

TRAINING OBJECTIVES

List the academic objectives for the work period and what skills/experiences the student will gain:

The following parties have agreed to the Training Objectives:

Student Signature: _____ **Date:** _____

Supervisor Signature: _____ **Date:** _____

Faculty Advisor Signature: _____ **Date:** _____



CURRICULAR PRACTICAL TRAINING (CPT) REQUEST FORM

Last Name	First Name
Major: <input type="checkbox"/> MBA Concentration <input type="checkbox"/> MIS <input type="checkbox"/> IBM <input type="checkbox"/> ENT <input type="checkbox"/> ACCTG	SEVIS ID Number:
Birth Date:	Email:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Phone#:

Applying Quarter: _____
Quarter Year

CPT Starting Date: _____ Ending Date: _____
MM/DD/YYYY MM/DD/YYYY

Company Name:	Job Position:
Company Address:	
Job Description:	
How does your job relate to your major?	
Student's Signature:	Date:

OFFICE USE ONLY	
Approved	Conditionally Approved: _____ Declined: _____

Chief Academic Officer Signature: _____	Date: _____



CPT STUDENT REGISTRATION FORM

Office Use Only

Year: _____

Quarter: Winter Spring Summer Fall

Please print clearly and accurately.

Date

Last Name,	First	M.	Date of Birth
Street		City	State Zip
Email			Phone

1. CPT Application	2. Job Offer Letter	3. CAO Interview	Course Number	Course Title	Units	Total Tuition
Initial	Initial	Initial	MA 750	Curricular Practical Training Course	2	\$200

1. To continue applying for CPT with the same position & company, only fill out CPT Request form & Registration Form.
2. The Job offer letter must meet the requirements (See the sample letter for more details)
3. New applicants must meet with the CAO for approval.
Continuing applicants must meet with the CAO if the student's job position and/or company changes.

A \$35 Fee will be assessed to any return check, either for Non-Sufficient Funds or for Stop Payments.

By signing this form, I acknowledge that I have read and understand the contents of this form and agree to the policies and procedures of registration.

Student's Signature

----- Office Use -----

- NEW**
 1. CPT Application
 2. Job Offer Letter
 3. CAO Interview
 4. Payment
 CONTINUING
 5. CPT I-20 issued/Date _____

Received by _____ Date _____

Approved by _____ Date _____

REMINDER:

**Your completed
Employer
Evaluation Form
is to be submitted
via your CPT
Moodle page
at the end of the
quarter.**



California Trinity School of Business
Employer Evaluation of CPT Student Worker Form

Student Name:					Date:				
Evaluation Period: From					To:				
Describe work assigned:									
Rating: In the boxes below, rate the student on each of the items below as Outstanding (O) , Very Good (VG) , Average (A) , Below Average (BA) , or Not Applicable (NA) . Put a check mark in the boxes below.									
O	VG	A	BA	NA					
					1.	Completes work accurately and thoroughly			
					2.	Completes work timely and has ability to work under pressure			
					3.	Understands assignments, follows instructions and takes initiative			
					4.	Has ability to adjust to non-routine assignments and to make decisions			
					5.	Works independently, keeps constructively busy and mentally alert			
					6.	Analytical ability and judgment; sensitivity to problems and ability to resolve			
					7.	Has healthy attitude and is cooperative in working relationships with staff			
					8.	Exhibits diligence and perseverance; performs tasks with industry and drive			
					9.	Accepts responsibility; is trustworthy and conscientious			
					10.	Exhibits neatness and clarity of work			
					11.	Creates positive impression with client personnel			
					12.	Exhibits creativity			
					13.	Appearance appropriate to professional work; neat and well groomed			
					14.	Written communication skills			
					15.	Verbal communication skills			
Enter comments below, which describe the student's performance for you.									

Strong points which were evident:
Recommendations for improvements:

Signature of Employer: _____

Signature of Student: _____

This evaluation should be discussed with the student and a copy submitted to the CTU Admin Office as soon as possible.