



**F. Graduation date**

Please indicate when you will complete your program:

End of \_\_\_\_\_ semester

Other \_\_\_\_\_  
(Semester/Year)

**G. Credit Hours Earned** (The section below must be reviewed and signed by your academic advisor.)

1. What is the total number of credit hours required for the completion of the degree on which your CPT request is based? \_\_\_\_\_
2. How many of those credit hours did/will you have already completed by the end of the session/semester? \_\_\_\_\_ hours
3. By the end of the session/semester, will you have already finished all required coursework of the academic program on which your CPT request is based?      < H V                      1 R

**H. Required Signatures**

**Academic Advisor**

I certify that this student has not yet completed all coursework required for the completion of the degree that the CPT request is based on. I certify that the CPT employment is in a field related to the student's major or minor field of study and is not a part of the established curriculum.

\_\_\_\_\_  
\$FDGHPLF \$GYLVRU 1DPH      SULQWHGRU 6LJQD Academic Advis      Signature Date

**CPT STATEMENT OF ACK3**