University of Colorado **Boulder**

Academic Advisor Academic Training Recommendation

Immigration regulations allow for the authorization of paid or unpaid training, work, or internships directly related to a J-1 student's major field of study as indicated on the DS-2019, when appropriate, provided authorization is received from International Student & Scholar Services (ISSS) for each employer and activity in advance of engaging in the activity, and maximum participation time limits are not exceeded [22 C.F.R. § 62.23 (f)]. Regulations indicate that J-1 students must obtain a letter of recommendation from their academic advisor/dean (at CU Boulder).

Review the student's job offer letter and training goals and complete this form letter if the academic training experience your advisee is pursuing is an integral or critical part of their academic program at CU Boulder.

At the end of the Academic Training, the student and training supervisor will evaluate the training program based on the goals indicated below.

Student Information

Student Name: _____
LAST/FAMILY Name First & Middle Name

Degree Program Level: ☐ Bachelor's ☐ Master's ☐ Doctorate

Major Field of Study: _____

Anticipated Date of Completion of Studies: _____
Month/ Day/ Year

This completion date is the:

- ☐ Graduation date
- ☐ Master's/Ph.D. defense date
- ☐ Thesis/dissertation submission date
- ☐ Other: _____

Academic Training Program Information

Start Date: _____ End Date: _____
Month/ Day/ Year Month/ Day/ Year

Position Title: _____ Number of Hour/Week: _____

Salary: _____ per ☐ Hour ☐ Week ☐ Month ☐ Year

Academic Training Location: _____
Number Street Address Suite/Unit # City State Zip

Training Supervisor's Name: _____ Title: _____

Training Supervisor Address (if different than the academic training location noted above):

Number Street Address Suite/Unit # City State Zip

Goals & Objectives of the Academic Training Program (Three goals are required.)

Goal 1:

Goal 2:

Goal 3:

How does the training relate to the student's major field of study?

How is the training an integral or critical part of the academic program of the student?

Academic Advisor Information

As the student's academic advisor, I have set forth the nature and details of the academic training program. I attest that this training experience is integral to the student's academic program and approve of the amount of time requested as necessary to complete the goals and objectives of the training. With this letter, I recommend that you authorize this student to participate in the academic training program detailed above.

Academic Advisor Name Signature Date

Email Phone