

ADVISOR AUTHORIZATION FORM



Curricular Practical Training

Date _____

Student's Name _____

PSU Student ID _____ - _____ - _____

Student's Major _____

Degree Level _____

Anticipated Graduation Date _____

Check here if the student is a **Hotel, Restaurant & Tourism Management (HRTM) major**. Students with this major are required to complete 800 hours of hospitality industry work experience to complete a bachelor's degree.

If the student is **not an HRTM** major, please indicate the course number associated with the practical training experience: _____. This course confers _____ semester hours of credit as listed in the undergraduate/graduate catalog.

Semester of Course Enrollment _____

Practical training will be _____ full time (>20 hours/week) _____ part time (<= 20 hours/week)

I certify that the above named student will be making normal progress toward completing his/her degree while pursuing practical training. This experience will enable the student to complete the requirements for the above named course and gain practical application of the principles learned therein.

Signature, Faculty or Academic Advisor

Name, Faculty or Academic Advisor (Please Print)

Department/School

E-mail Address

(518) 564 - _____
Phone Number

International Student Advisor / _____
Date

International Student Advisor / _____
Date

ISS International Student Services
SUNY Plattsburgh
Kehoe, 209
101 Broad Street
Plattsburgh, New York 12901

Phone: 518/564-3287
FAX: 518/564-3292
www.plattsburgh.edu/international