



GENERAL INFORMATION

Academic training is an employment benefit extended to J-1 students. Its purpose is to give students the opportunity to gain off-campus work experience in an area directly related to their field of study. Students must request and obtain academic training authorization from UCF Global before beginning any off-campus employment.

Academic training is limited to an 18-month period or the length of full course of study in the United States, whichever is less. For students who have completed a doctoral program, an 18-month extension may be granted, totaling 36-months of academic training or the length of full course of study in the United States, whichever is less.

Students must apply for academic training at least 30 days prior to their program end date.

APPLICATION CHECKLIST

- Signed offer letter on letterhead from employer including the following details:
 - Employment start date and end date
 - Physical address of employment
 - Number of hours per week
 - Job description, responsibilities, and objectives
 - Supervisor full name, title, email address and telephone number

- Letter of support from student’s academic adviser including the following details:
 - Goals and objectives of the specific academic training program
 - How job duties directly relate to student’s field of study
 - Why the training is an integral or critical part of the academic program

IMPORTANT REMINDERS

Academic training is employer specific, position specific, and date specific. Students must consult with an immigration advisor at UCF Global prior to any changes in their academic training.

Employment may be paid or unpaid, and part-time or full-time. Self-employment will not be considered for academic training.

For post-completion academic training, employment must begin no later than 30 days after completion of studies. Academic training must be granted at least 30 days prior to the initial program end date.

Students and their dependents must maintain and provide UCF Global with proof of adequate medical insurance throughout the duration of the academic training in order to maintain their status.

I have read and understand the academic training guidelines and agree to end any on-campus employment not related to academic training following my graduation.

Student Signature: _____

Student Name: _____ UCF ID: _____

Education Level: Bachelor’s Master’s Ph.D. Major: _____



ACADEMIC TRAINING AUTHORIZATION – LETTER OF SUPPORT

To be completed by student’s academic advisor:

Academic Advisor Name: _____

Email Address: _____ Telephone: _____

Clearly indicate the goals and objectives of the specific academic training program.

Describe how the proposed job duties directly relate to student’s field of study.

Explain why the training is an integral or critical part of the academic program.

I confirm that the above is true and correct to the best of my knowledge.

Academic Advisor Signature: _____ Date: _____