

Student Request for OPT

First name: _____ Family Name: _____

Email: _____ Student ID #: _____

Non-school email you regularly use: _____

Phone number: _____

Do you plan to travel outside the U.S. Yes No

Have you previously been authorized for Curricular Practical Training (CPT)? Yes No

Have you previously been authorized for Optional Practical Training (OPT)? Yes No

Degree being sought (BA, BS, etc.): _____ Major Area of Study: _____

Expected date of graduation: _____

Will you have completed all required coursework by the time your OPT begins? Yes No

OPT Start Date: _____ OPT End Date: _____

Reporting information to International Programs Office

While on OPT you are required to report certain information to ISS. Changes to any of the following must be reported **within 10 days** of the event.

1. Change in name or residential/ mailing address.
2. Report your employer name, address, and supervisor's email within 10 days of any changes or employment.
3. Report changes to another immigration status.
4. If you leave your OPT employment before your OPT end date.
5. Notify ISS if your email changes.

By signing I verify that the information provided on this form is complete and accurate to the best of my knowledge.

Student Signature: _____ Date: _____