

Initial 12-Month OPT Request Form

Student First Name	Student Last Name	E _____
Emich E-mail Address	Personal E-mail Address	1 (____) _____
Current Address	Current City State	Zip code
Student Major or Field of Study	Degree Level (Bachelor, Master, Ph.D.)	Expected Graduation Date

Optional Practical Training is intended to provide hands-on, practical work experience that is complimentary to your academic program. An F-1 student may be eligible for **12 months OPT**, provided this practical training is **directly related to your field of study**, is **commensurate** with your educational level, and is **recommended** by your academic advisor.

Desired OPT start date: _____ **and end date:** _____

Program End Dated Date	Fall 2016 12/20/2016	Winter 2017 04/25/2017	Summer 2017 08/15/2017	Fall 2017 12/19/2017	Winter 2018 04/24/2018
Application					
First Date for USCIS to receive application (90 days before the program end date)	9/21/2016	01/25/2017	05/17/2017	09/20/2017	01/24/2018
Last Date for USCIS to receive application (60 days after the program end date)	02/15/2017	06/24/2017	10/14/2017	02/17/2018	06/23/2018
Employment					
Earliest Employment Start Date	12/21/2016	04/25/2017	08/16/2017	12/20/2017	04/25/2018
Latest Employment Start Date (60 days after the program end date)	02/18/2017	06/24/2017	10/14/2017	02/17/2018	06/23/2018
Date OPT Must be Completed (14 months from program end date)	02/20/2018	06/25/2018	10/15/2018	02/19/2019	06/24/2019

In making this request I understand and agree to abide by all requirements, including

- I will **report all changes** in my US or overseas **address** to OISS within 10 days of such change
- I will **provide OISS** with a **copy** of my Employment Authorization Document (**EAD**) upon receipt
- I understand that I **cannot begin working until I have my EAD card in-hand** and only during the dates in which my EAD card is valid.
- I will **report** the name & address of my **employer** to OISS within 10 days of starting work
- I know I **should have health insurance** coverage for the duration of my F1 status, including the OPT period

Student Signature
Date

OPT Workshop attended on: _____ **OISS advisor signature** _____