

# OPTIONAL PRACTICAL TRAINING CERTIFICATION REQUEST FORM: POST-COMPLETION OPT

## Part I: To be completed by STUDENT

By completing this form, you are requesting a new I-20 from ISSS which will show that OPT has been recommended in SEVIS. Before an ISSS advisor can update your SEVIS record, **Part II of this form must be completed by an appropriate representative in your academic department** (undergraduate major or graduate program) such as your: **Academic Advisor, Program Coordinator, Department Chair or Major Professor.**

\_\_\_\_\_  
LAST NAME FIRST NAME Panther ID: \_\_\_\_\_

Current Degree Level:  Bachelor's  Master's  Doctorate  Certificate  Other

Have you applied for OPT before?  YES  NO (If YES, bring copies of OPT card/USCIS decision to appointment with ISSS advisor)

Requested OPT Start Date: \_\_\_/\_\_\_/\_\_\_\_ (MM/DD/YYYY)

**NOTE: Requested OPT start date must be in the 60-day grace period which commences from the last day of final exams (as indicated on the university's academic calendar) in your completion term. The program end date currently on your I-20 will be changed (if necessary) to reflect the last day of your completion term as indicated below.**

## Part II: To be completed by ACADEMIC ADVISOR

The information on this form will be used to update the SEVIS (immigration) record of the above international student.

Student's expected completion term: (Semester)\_\_\_\_\_ (Year)\_\_\_\_\_

If completing in summer, will the student take his/her final class in Summer A?  YES  NO

Cumulative GPA:\_\_\_\_\_ Has the student applied for graduation?  YES  NO\*

Does the student have pending incomplete ("I") grades from previous semesters?  YES\*  NO

If YES, explain how/when the work for the course(s) will be completed: \_\_\_\_\_

### FOR GRADUATE STUDENTS WHO WILL COMPLETE A THESIS OR DISSERTATION:

Has the student completed all required coursework for the program of study?  YES  NO

Defense Date (if scheduled): \_\_\_/\_\_\_/\_\_\_\_

### UNIVERSITY GRADUATE SCHOOL Endorsement:

(Required only if applying for Full-Time Post-Completion OPT while registered for Thesis/Dissertation credits only):

\_\_\_\_\_  
Name of UGS Dean or Associate Dean

\_\_\_\_\_  
Dean's Signature

\_\_\_\_\_  
Date

\*NOTE: OPT may not be recommended by ISSS advisor until after the student's application for graduation has been submitted and after all incompletes are changed to a final grade in Panthersoft.

## Academic Advisor's Signature

Confirm that the information above is correct.

Name (Print) \_\_\_\_\_ Title \_\_\_\_\_

Department \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_