

Supplemental Information for Optional Practical Training: SEVIS

Complete and return to International Center (IC)—SU250

Name: _____
LAST (CAPS) First Middle

Current Address (where you are currently residing):

Mailing Address (include Apt. # and/or P.O. Box as applicable) City and State ZIP Code

IMPORTANT: Always update with the current address (Campus Hub, SU117)

List Future Address if Known:

Mailing Address (include Apt. # and/or P.O. Box as applicable) City and State ZIP Code

*The International Center would like to keep an address list to send announcement updates (for example, Visa lottery, international information, alumni gatherings, etc. If you do **NOT** wish to be on our email list, check here .*

List non-MSU email address(es), so we can reach you after graduation.

Emailing Address Other Email Addresses, if more

Describe the proposed employment for practical training:

A position in the field of (major) _____

OPT Dates:

- Full-Time upon completion of studies, on your graduation day for undergraduates and /or when a graduate student has completed all course requirements for a Master's Degree except on their thesis or alternative plan paper.
- Full-time during summer vacation period practical training
- Part time during academic year (work up to 20 hours and must maintain full-time status) undergraduate or graduate status.
Full-time enrollment for the preceding nine (9) months is required and the student must plan to register for 12 credits and meet the requirement guidelines for the next term.

Beginning Date: _____ / _____ / _____ (mm/dd/yy) as you wish to have on the EAD—OPT Card

*Beginning date must be a date between your graduation date and 60 days after

Ending Date: _____ / _____ / _____ (mm/dd/yy)

*MAXIMUM end date is 1 year from the beginning date

Current Semester Course Load Registration (circle): Full-time OR Part Time

If less than full-time, Reduced Course Load Form completed and filed (circle): Yes / No / Not Applicable

List ALL periods of previously authorized employment training.	Start Date	End Date	Additional Dates if applicable
Economic Hardship	/ /	/ /	
Curricular Practical Training	/ /	/ /	
Optional Practical Training	/ /	/ /	

If applying for post-completion OPT, the following information is REQUIRED to confirm your anticipated degree completion.

Student Completes Steps 1-4

1. Degree Expected: _____
 2. Major or Field of Study: _____
 3. Graduation Confirmation Date: _____ (Undergraduate (UG) Student) OR Date of Scheduled APP/Thesis Defense or Project Completion: _____ (Graduate Student)
 4. Turn in to the International Center (SU250) along with one (1) of the following options:
 - Provide a letter on the department letterhead confirming the information above.
 - Provide the information above which has been completed by the person checked (below).
- Or provide an evaluated application for graduation with:
- Copy of your unofficial transcript
 - Date of response that the application for graduation was evaluated.

Only <u>One</u> Person Below Is Required		Signature to confirm graduation date listed above		
✓	Relationship to Student	Name	Phone #	MSU Ext.
	Student's Academic Adviser		()	
	Registrar's Office for UG		()	
	Department Chair		()	
	Graduate Studies for master/doctoral degree		()	
	Other:		()	

Signature of the Representative Above

_____/_____/_____
Date

Reminder

Please bring the following documents with this form when you come to the IC for your OPT appointment:

- I-765 form, on line 16 put:
 - Pre-completion OPT: (c) (3) (A)
 - Post-completion OPT: (c) (3) (B)
 - 17 month STEM OPT extension: (c) (3) (C)
- Copy of completed I-765
- A completed verification form or letter from your Advisor/Department Chair or Registrar stating your graduation date
- Two passport photographs—the photos should show a front view on a white background. See attached description and guidelines for photographers. http://travel.state.gov/passport/guide/guide_2081.html (please write your name and I-94 number on the back of each photo)
- Unofficial MSU transcript
- Copy of your unexpired Passport
- Copy of both sides of the I-94 card
- Copy of previous EAD card (if issued)
- Copy of previous I-20s

