



OPTIONAL PRACTICAL TRAINING (OPT) REQUEST FORM

APPLICANT INFORMATION (THIS SECTION MUST BE COMPLETED BY STUDENT)					
Last Name:		First Name:			
SF State Student ID:		SEVIS ID:			
Phone:		SF State E-mail:	@mail.sfsu.edu		
Major:		2 nd Major:			
Level of Study:	<input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's				
Have you been authorized CPT in the past? <input type="checkbox"/> No <input type="checkbox"/> Yes					
Are you currently employed on campus? <input type="checkbox"/> No <input type="checkbox"/> Yes – Please read the applicant requirements and responsibilities carefully.*					
Requested OPT Period:	Start Date:		End Date:		
<input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time					
Student's Signature:				Date:	
ACADEMIC INFORMATION (THIS SECTION MUST BE COMPLETED BY YOUR MAJOR ACADEMIC ADVISOR)					
*UNDERGRADUATE BUSINESS AND HTM MAJOR STUDENTS MUST GET A SIGNATURE FROM BUS 112.					
<i>I verify that the student is currently is making normal progress toward the degree.</i>					
Which semester is the student expected to graduate from SF State?		<input type="checkbox"/> Spring	<input type="checkbox"/> Summer	<input type="checkbox"/> Fall	Year
<i>By signing, I hereby confirm that the information provided in this section is true and correct.</i>					
Advisor's Signature:					
Advisor's Name: (Print)					
Department:					
Date:				Phone:	

APPLICANT REQUIREMENTS AND RESPONSIBILITIES

Please review the requirements and responsibilities below:

- I have viewed the OPT Information and Application Workshop through the OIP web link at <http://oip.sfsu.edu/opt>, and I confirm that I have met all OPT requirements.
- OPT will be recommended by OIP on a new I-20 form. This does not guarantee that US Citizenship and Immigration Services (USCIS) will approve of my OPT request.
- I cannot work on campus beyond my program completion date or the last day of finals, whichever comes first.*
- I cannot start to work until I received the Employment Authorization Document (EAD) and the start date indicated on my EAD has met.
- I am only allowed to work in my field of study only during the dates specified on the EAD.
- I ensure that the information provided in my OPT application is accurate.
- I must pick up my OPT application from OIP within **10 working days**, and mail it to USCIS immediately. My application will be denied if it is not received by USCIS within 30 days of I-20 issue date.
- My passport must be valid all the time during my stay.
- I must maintain health insurance coverage for myself and dependent(s) during my OPT.
- OPT will be automatically terminated if I transfer to another school or start a new degree program.
- I cannot be unemployed for more than a total of 90 days during my entire 12 month OPT period, including periods between jobs. It is my responsibility to report my employment at SEVP Portal: <http://www.sevp.ice.gov/opt>
- I must report any changes in the following information within **10 days**:

To change your legal name	Email F-1 advisors at f1@sfsu.edu for instructions
To change U.S. address and phone number	For U.S. Immigration: Update your account at SEVP Portal http://www.sevp.ice.gov/opt For SF State: Update your student record at online SF State student center.
To change employers information and report loss of employment	Logon to SEVP Portal at

- It is my responsibility to obtain a travel signature from OIP if I am going to travel outside the U.S. while I am on OPT. A travel signature is only valid for 6 months. I must have both a valid F-1 student visa and passport in order to re-enter the U.S.
- I understand that:
 - If I travel before the EAD is issued, then upon my attempt to re-enter the U.S. I may be asked for evidence to show that I am looking for a job; and
 - If I travel after my EAD is issued I can only re-enter the U.S. to RESUME employment, which means that I must already have a job or a job offer; and
 - I acknowledge that if I travel while the EAD application is pending and the EAD card is issued prior to my return to the U.S., that I must have a job upon my re-entry to the U.S.

ACKNOWLEDGEMENT AND SIGNATURE

I have read, and now understand the above requirements. It is my responsibility to abide by the regulations governing the OPT and to maintain F-1 status. Failure to abide by the requirements will terminate my F-1 status and thus my ability to work and otherwise remain in the U.S.

Student Signature:		Date:	
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