



CENTER FOR INTERNATIONAL AFFAIRS,
IMMIGRATION, AND STUDY ABROAD

**OPTIONAL PRACTICAL TRAINING
DSO RECOMMENDATION REQUEST FORM**

1. PERSONAL AND PROGRAM INFORMATION:

Name _____ Date _____

Local Address _____

Phone _____ Email _____

SEVIS ID# _____ College _____

Degree Program _____ Major _____

Expected Date of Completion of Studies _____

2. OPT REQUEST

Post-completion of Studies:

Starting _____

Your start date may be any date after you complete your studies up to 60 days later. If you choose a date within the 60-day period following the completion of your program, you will likely not receive the full 12-month OPT benefit due to USICS processing delays)

Ending _____

You must apply for all of the 12-month benefit you have remaining for this program of study unless you have plans for further study at the same educational level

3. PREVIOUS OPT: If you have previously received OPT employment authorization for your current education level, indicate the date(s) it was authorized and the start and end dates on your Employment Authorization Document(s) (EAD)

Starting on _____ Ending on _____

4. DESCRIBE YOUR PROPOSED EMPLOYMENT AND EXPLAIN HOW IT RELATES TO YOUR MAJOR. Do not say that you are “seeking an entry-level position that is appropriate to your skills and experience”!

5. GRADUATION CERTIFICATION

I certify that the student named on the other side of this request form is expected to complete or has completed all of the requirements for his/her program of study on (date)_____ and that the proposed employment described in item #4 above is directly related to his/her current major field of study.

Departmental Signature

Name (print)

Title (print)

Department

Telephone

E-mail

Date Signed

6. STUDENTS' ACKNOWLEDGEMENT OF UNDERSTANDING

I understand that I am requesting the DSO's recommendation for Optional Practical Training Employment authorization. The Center for International Affairs will advise and assist me with reviewing my application for completeness and eligibility. Once the school has recommended the OPT, the application will be returned to me for filing it at the USCIS.

I understand that I am completely responsible for properly filing my OPT application with the USCIS and tracking its processing through the [USICS Case Status Online System](#).

My Signature

My Name (print)

Date Signed