

OPT Pre-Application Form

Please fill out the application completely and bring it with you to the OPT appointment with Qiwei Zhang ([qzhang001@csbsju.edu](mailto:qzhang001@csbsju.edu)).

**Personal Information**

First Name: \_\_\_\_\_

Family Name (Last Name): \_\_\_\_\_

Address: \_\_\_\_\_

Personal Email Address: \_\_\_\_\_

Major: \_\_\_\_\_

Describe the type of employment you hope to obtain for OPT:

\_\_\_\_\_

Preferred OPT start date: \_\_\_\_\_

OPT end date: \_\_\_\_\_

**Note: Be sure to choose a start date within the 60-day grace period following your date of completion. Your OPT end date should be exactly 12 month later.**

**Academic Program Information**

Confirm Date of Graduation: \_\_\_\_\_

Please read and select each box:

If my OPT is approved, I understand that I am responsible for maintaining my F1 status.

I verify that I will notify the Multicultural Student Services Office...

When any change in my name or address occurs.

**Multicultural Student Services**

*Inspired Learning. Inspiring Lives.*

When I get a job, the job title, name, and address of my employer.

Any change to the name or address of the employer.

**I authorize Multicultural Student Services staff members to open any correspondence from USCIS regarding my application.**

Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **Academic Advisor's Approval**

Is this student on track to complete all his/her coursework by the end of this term?

Yes    No

If "yes", when?    Fall    Spring    Summer 20\_\_\_\_\_

If "no", which classes are needed to complete coursework by beyond this semester?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student's confirmed semester of graduation?

May    August    December Year \_\_\_\_\_

With my signature below, I recommend authorization for this student to participate in Optional Practical Training.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name & Title: \_\_\_\_\_

## **Multicultural Student Services**