



INTERNATIONAL STUDENT OFFICE

F-1 Post-Completion Optional Practical Training Recommendation Form

Section A (to be completed by student)

Name: _____ ID #: _____

Expected Date of Completion of Study: _____

I am requesting the following dates for OPT and understand that these dates cannot be changed once the OPT application has been submitted to USCIS.

OPT Start Date: _____ OPT End Date: _____
(Choose a beginning date from 1 to 59 days after your Program Completion Date)

Please list any previous employment authorization (OPT, CPT, economic hardship under F-1) for both full-time and part-time:

Student's signature: _____ Date: _____

Section B (to be completed by student's academic adviser)

Immigration regulations require that Post-completion Optional Practical Training must be used by the students after completion of a degree. Please return the completed form to the student or directly to the International Student Office. Thank you for your assistance.

Major (Field of Study): _____ Degree Expected: _____

Expected Program Completion Date: ___ / ___ / ___

I certify that, to the best of my knowledge, the above information is accurate and true.

Academic Record Adviser's Name: _____ Campus Phone: _____

Signature: _____ Today's Date: _____

Please return to: Email: iso@moody.edu