

# F-1 Optional Practical Training Request Form

## Part I (To Be Completed By Student)

Name: \_\_\_\_\_ SMU # \_\_\_\_\_

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: \_\_\_\_\_

Please describe the type of employment you will be seeking.

\_\_\_\_\_

Please list any previously authorized periods of OPT: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## Part II (To Be Completed by Student's Academic Adviser or Dean)

Immigration regulations require that *Optional Practical Training* be used by students for employment related to the student's field of study. Please return the completed form to the student. Any questions can be directed to the Office of International Programs & Development. Thank you for your assistance.

Academic Adviser's Name and Department: \_\_\_\_\_

\_\_\_\_\_

Degree Expected: \_\_\_\_\_ Major or Field of Study: \_\_\_\_\_

When will this student complete his or her studies at Saint Martin's University? \_\_\_\_\_

This date represents (please check one)

  

Submission of dissertation / thesis

Graduation / Conferral of Degree date

Other (please explain):

**Note: An international student must be registered as a full time student every semester to maintain legal F-1 status.**

To the best of your knowledge, is the proposed employment noted above related to the student's field of study and appropriate to the student's education level? Yes  No

\_\_\_\_\_  
Adviser's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number