AUSTIN COLLEGE

Student Name (as shown in the passport)

Select the type of OPT that you will request:

Post-completion OPT

Pre-completion OPT

OPT I-20 date change

OPT I-20 reprint

OPT Date Information

OPT Start Date and OPT End Date: MM/DD/YYYY to MM/DD/YYYY

How many hours a week of work?   Note: Post-completion OPT must be full-time work.

Full-time

Part-time

When do you plan to complete your academic program of study? (term-year)

Have you applied for graduation?

Yes   No

Have you completed any CPT?   * If Yes...

Yes*   I have had less than a year of full-time CPT.

No   I have had a year or more of full-time CPT.

Attach to this form a copy of the following documents:
1) A photocopy of your passport demographics page.
2) Completed copy of the I-765 form
3) EAD card (if you have received an EAD in the past)

Submit this request form to the Austin College Registrar's Office with student signature. With a signature you agree to perform the appropriate reporting requirements through the application process and during your entire OPT.

Student Signature   Date