

# OPTIONAL PRACTICAL TRAINING CERTIFICATION REQUEST FORM: PRE-COMPLETION OPT

## Part I: To be completed by STUDENT

By completing this form you acknowledge that you wish to apply for Pre-Completion OPT and that you are aware that pursuing OPT prior to graduation will deduct time from the 12 month OPT period for which you are eligible. USCIS processing time may take more than 90 days, which should be taken into consideration when selecting an OPT start date. The requested OPT end date may not be later than the last day of the expected completion term indicated by the academic advisor below. Only part-time employment authorization may be granted during the fall and spring semesters; students may apply for full-time Pre-Completion OPT if the requested authorization period is during the summer term only. Graduate students who have completed all coursework and are registered for thesis or dissertation credits only may also apply for full-time Pre-Completion OPT, but only with the permission of the Graduate School.

\_\_\_\_\_  
LAST NAME FIRST NAME Panther ID: \_\_\_\_\_

Current Degree Level:  Bachelor's  Master's  Doctorate  Other

Have you applied for OPT before?  YES  NO

If YES, which type? (Bring copies of OPT card/USCIS decision to appointment with ISSS advisor)

- Post-Completion OPT after a previous degree:  AA  Bachelor's  Master's  Certificate  
 Pre-Completion OPT

Requested OPT Start Date: \_\_\_/\_\_\_/\_\_\_\_ Requested OPT End Date: \_\_\_/\_\_\_/\_\_\_\_ (MM/DD/YYYY)

Requested Hours:  Part-Time (20 hours or less per week)  Full-Time (more than 20 hours per week)

## Part II: To be completed by ACADEMIC ADVISOR

The information on this form will be used to update the SEVIS (immigration) record of the above international student.

Student's expected completion term: (Semester)\_\_\_\_\_ (Year)\_\_\_\_\_ Cumulative GPA:\_\_\_\_\_

### FOR GRADUATE STUDENTS WHO WILL COMPLETE A THESIS OR DISSERTATION:

Has the student completed all required coursework for the program of study?  YES  NO

Defense Date (if scheduled): \_\_\_/\_\_\_/\_\_\_\_

### UNIVERSITY GRADUATE SCHOOL Endorsement:

(Required only if applying for Full-Time Pre-Completion OPT while registered for Thesis/Dissertation credits only):

\_\_\_\_\_  
Name of UGS Dean or Associate Dean

\_\_\_\_\_  
Dean's Signature

\_\_\_\_\_  
Date

## Academic Advisor's Signature

Confirm that the information above is correct.

Name \_\_\_\_\_ Title \_\_\_\_\_

Department \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_