



COLORADO COLLEGE

Center for Global Education & Field Study
(719) 389-6024

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Colorado Springs, CO 80903

OPTIONAL PRACTICAL TRAINING (OPT) REQUEST INSTRUCTIONS

The process of applying for Optional Practical Training (OPT) employment authorization begins with submitting an OPT request to International Student & Scholar Services (ISSS). A complete OPT request consists of the following documents:

- Form I-765 (Application for Employment Authorization)
- Colorado College OPT Request Form
- Your signed "Post-Completion Optional Practical Training (OPT) Agreement" (for applications for Post-completion OPT)
- A copy of your current I-20 & copies of any I-20s with CPT authorization
- Copy of the biographical page of your passport
- Form I-94 Admission Record (can be obtained at www.cbp.gov/I94)
- A photocopy (front and back) of your last Employment Authorization Document (EAD), if applicable.

Additional information about these documents is provided below.

After receipt of a complete OPT request, ISSS will update your SEVIS record and produce a new Form I-20 for you with a recommendation for OPT noted on Page 2. **ISSS requires three business days for processing an OPT request.** ISSS will contact you to pick up the new Form I-20 and application documents, which you must then mail to the U.S. Citizenship and Immigration Services (USCIS). Mailing instructions will be provided to you when you pick up your new I-20 with the OPT recommendation.

ISSS recommends that you begin your OPT request process at least 3 weeks before you want your application to be received by the USCIS.

Completing the Form I-765

Step 1	Download the Form I-765 (Application for Employment Authorization) from the U.S. Citizenship and Immigration Services (USCIS) web site at: http://www.uscis.gov/i-765 .
Step 2	If this is the first time you are applying for OPT at your education level (i.e. bachelor's, master's, or doctorate), check the "I am applying for:" box on the Form I-765 for "Permission to accept employment."
Step 3	<p>Enter your personal information on questions #1 to #7. On #5, put a U.S. mailing address where you can receive correspondence from the U.S. Citizenship and Immigration Services (USCIS) office, including your Employment Authorization Document (EAD), and which will be valid for at least the next six months.</p> <p>Note: Government mail will not be forwarded by the postal service if you move. If you choose to use a friend or family member's mailing address, be sure to use box #5a to provide the person's name before the street number and name part of the address.</p>
Step 4	<p>Questions 13.a. – 13.b. asks you if the Social Security Administration (SSA) has ever officially issued you a Social Security card. If the SSA ever issued a Social Security card to you, then you must enter the SSN from your card in #13.b. Enter "no" for #14 and skip to Part 2, Item Number #18.a.</p> <p>If you want the SSA to assign you a Social Security number and issue you a Social Security card when your request for employment authorization is approved, then answer "yes" to both #14 and #15. You must also provide your father's and mother's family and given names at birth in #16.a – 17.b.</p> <p>You are not required to request an SSN using this application. Completing Item numbers 13.a. – 17.b. is optional. However, you must have an SSN properly assigned in your name to work in the U.S.</p>
Step 5	On question 21.a. enter your 11-digit Form I-94 number. The Form I-94 number is also called the Admission Record Number. The Form I-94 is the Arrival/Departure Record issued by a Customs and Border Protection (CBP) officer to foreign visitors entering the United States. You may print out your electronic Arrival Record at www.cbp.gov/i94 .
Step 6	On #22 and #23 enter when and where you last entered the United States.
Step 7	On #24 enter "F-1 Student," unless you last entered the United States in another visa status.
Step 8	On #25 enter that you are an "F-1 Student."

Step 9	On #26 enter your SEVIS ID# found on the upper left-hand side of your I-20 form.
Step 10	On #27 enter the appropriate code: Pre-Completion OPT - (c) (3) (A) Post-Completion OPT - (c) (3) (B) 24-month extension for STEM OPT - (c) (3) (C)
Step 11	In the Certification section, sign your name (be sure to keep your signature <u>within</u> , but not touching, the borders of the signature field box!), date the form, and enter your telephone number.

Completing the OPT Request Form

Indicate on this form the type of OPT you are requesting, any previous CPT or OPT authorizations, and your requested OPT start date and OPT end date*. If you are applying for post-completion OPT, sign and date the "Post-Completion Optional Practical Training (OPT) Agreement Form" (see page 3 of the OPT Request Form packet) and submit it with your OPT Request Form.

*For post-completion OPT: your start date can be as early as 1 day after your program end date, and as late as 59 days after your program end date. Your OPT end-date depends on how many months of OPT you have used. If you have not used any OPT, your OPT end date can be 1 full year after the start date. For example: If you choose a start date of 5/30/2017, your latest end date will be 5/29/2018.

I-20(s)

Submit a copy of your current I-20 and copies of any I-20s with CPT authorization.

Passport

Submit a copy of the biographical page of your passport.

Form I-94 Admission Record

The Form I-94 is the Arrival/Departure Record issued by a Customs and Border Protection (CBP) officer to foreign visitors entering the United States. You can print your most recent I-94 record from <http://www.cbp.gov/i94>. If you have a paper I-94, include photocopies of the front and back of your I-94 card.

Previous Employment Authorization Document (EAD) – if applicable

If you have previously received an Employment Authorization Document (EAD), submit a photocopy (front and back) of the EAD card.

Next Steps

While your OPT request is being reviewed and processed by an ISSS staff member, please prepare:

1) Two color photographs

As part of your Form I-765 petition, you must submit to the USCIS two identical color photographs of yourself taken within 30 days of filing your application. The photos must have a white to off-white background, be printed on thin paper with a glossy finish, and be unmounted and unretouched.

The passport-style photos must be 2" by 2". The photos must be in color with full face, frontal view on a white to off-white background. Head height should measure 1" to 1-3/8" from top to bottom of chin, and eye height is between 1-1/8" to 1-3/8" from bottom of photo. Your head must be bare unless you are wearing headwear as required by a religious order of which you are a member. Using pencil or felt pen, lightly print your name and your Form I-94 number on the back of each photo.

2) Form I-765 filing fee of \$410

As with any other immigration application fees, this amount is subject to change. Please make sure to check the USCIS web site for the current Form I-765 application filing fee before submitting your payment. There are currently two forms of payment for the Form I-765 filing fee:

a. Check or money order made payable to the "U.S. Department of Homeland Security"

Attach the payment to the top of your application when mailing to the USCIS. If you do not have a U.S. checking account, then you may submit your filing fee payment in the form of either:

- A personal check issued by another individual;
- A money order in the amount of \$410. Note: You can take \$410 in cash to the 7-11 store on Nevada Street (across the street from the Colorado College campus) and, for a small fee, purchase a money order in the amount of \$410.
- A cashier's check drawn on a U.S. bank account (either your own account or another individual's account).

Note: Any check or money order must be drawn on a bank or other financial institution located in the United States and must be payable in U.S. currency.

b. Credit card payment using Form G-1450 (Authorization for Credit Card Transactions)

To pay the filing fee for your Form I-765 application by Visa, MasterCard, American Express or Discover, you will need to use Form G-1450 (Authorization for Credit Card Transactions). You can download the Form G-1450 at: <https://www.uscis.gov/g-1450>. Place the Form G-1450 as the top document of your application materials when mailing to the USCIS.

If you submit a Form G-1450 with your Form I-765 application, the USCIS will use the information you provide on the Form G-1450 to process a credit card payment through the U.S. Department of Treasury Pay.gov Trusted Collections Service (TCS). TCS is a web-based application that allows U.S. government agencies to process payments by credit or debit cards.

After the USCIS processes your Form G-1450, they will destroy your authorization form to protect the credit card information, regardless if the USCIS approves or denies your Form I-765 application. Note: USCIS will reject your application for lack of payment if your credit card is declined. USCIS will not attempt to process your credit card payment a second time.

3) A Form G-1145 (E-Notification of Application/Petition Acceptance)

The Form G-1145 is optional, but recommended. If you include it, you will receive an email and/or text notification when your Form I-765 petition is received by the USCIS, which means that you will have your receipt number for your application sooner and can check the case status online. You can download the Form G-1145 at: <https://www.uscis.gov/g-1145>.



Application For Employment Authorization

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-765
OMB No. 1615-0040
Expires 05/31/2020

For USCIS Use Only	<input type="checkbox"/> Authorization/Extension Valid From	Fee Stamp	Action Block
	<input type="checkbox"/> Authorization/Extension Valid Through		
	Alien Registration Number A- <input style="width: 100px;" type="text"/>		
	Remarks		

To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).	<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney or Accredited Representative USCIS Online Account Number (if any) <input style="width: 100%;" type="text"/>
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▶ **START HERE** - Type or print in black ink.

Part 1. Reason for Applying

I am applying for (select only one box):

- 1.a. Initial permission to accept employment.
- 1.b. Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document **NOT DUE** to U.S. Citizenship and Immigration Services (USCIS) error.
- NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to **Replacement for Card Error in the What is the Filing Fee** section of the Form I-765 Instructions for further details.
- 1.c. Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

Part 2. Information About You

Your Full Legal Name

- 1.a. Family Name (Last Name)
- 1.b. Given Name (First Name)
- 1.c. Middle Name

Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 6.

Additional Information.

- 2.a. Family Name (Last Name)
- 2.b. Given Name (First Name)
- 2.c. Middle Name
-
- 3.a. Family Name (Last Name)
- 3.b. Given Name (First Name)
- 3.c. Middle Name
-
- 4.a. Family Name (Last Name)
- 4.b. Given Name (First Name)
- 4.c. Middle Name

Part 2. Information About You (continued)

Your U.S. Mailing Address

- 5.a. In Care Of Name (if any)
[]
- 5.b. Street Number and Name [123 Tejon Street]
- 5.c. Apt. Ste. Flr. [456]
- 5.d. City or Town [Colorado Springs]
- 5.e. State [CO] 5.f. ZIP Code [80903]
6. Is your current mailing address the same as your physical address?
 Yes No

NOTE: If you answered "No" to Item Number 6., provide your physical address below.

U.S. Physical Address

- 7.a. Street Number and Name []
- 7.b. Apt. Ste. Flr. []
- 7.c. City or Town []
- 7.d. State [] 7.e. ZIP Code []

Other Information

8. Alien Registration Number (A-Number) (if any)
▶ A- []
9. USCIS Online Account Number (if any)
▶ []
10. Gender Male Female
11. Marital Status
 Single Married Divorced Widowed
12. Have you previously filed Form I-765?
 Yes No
- 13.a. Has the Social Security Administration (SSA) ever officially issued a Social Security card to you?
 Yes No

NOTE: If you answered "No" to Item Number 13.a., skip to Item Number 14. If you answered "Yes" to Item Number 13.a., provide the information requested in Item Number 13.b.

- 13.b. Provide your Social Security number (SSN) (if known).

▶ [9 9 9 9 9 | 9 9 9 9]

14. Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 15., Consent for Disclosure, to receive a card.)

Yes No

NOTE: If you answered "No" to Item Number 14., skip to Part 2., Item Number 18.a. If you answered "Yes" to Item Number 14., you must also answer "Yes" to Item Number 15.

15. Consent for Disclosure: I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security card.
 Yes No

NOTE: If you answered "Yes" to Item Numbers 14. - 15., provide the information requested in Item Numbers 16.a. - 17.b.

Father's Name

Provide your father's birth name.

- 16.a. Family Name (Last Name) []
- 16.b. Given Name (First Name) []

Mother's Name

Provide your mother's birth name.

- 17.a. Family Name (Last Name) []
- 17.b. Given Name (First Name) []

Your Country or Countries of Citizenship or Nationality

List all countries where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in Part 6. Additional Information.

- 18.a. Country []
- 18.b. Country []

Part 2. Information About You (continued)

Place of Birth

List the city/town/village, state/province, and country where you were born.

19.a. City/Town/Village of Birth

Vancouver

19.b. State/Province of Birth

British Columbia

19.c. Country of Birth

Canada

20. Date of Birth (mm/dd/yyyy)

03/01/1996

Information About Your Last Arrival in the United States

21.a. Form I-94 Arrival-Departure Record Number (if any)

▶ 1 1 1 2 2 2 3 3 3 4 4

21.b. Passport Number of Your Most Recently Issued Passport

M98765432

21.c. Travel Document Number (if any)

21.d. Country That Issued Your Passport or Travel Document

Canada

21.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy)

05/21/2023

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)

01/20/2019

23. Place of Your Last Arrival Into the United States

Denver Colorado

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

F-1 student

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)

F-1 student

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

▶ N- 1234567899

Information About Your Eligibility Category

27. **Eligibility Category.** Refer to the Who May File Form I-765 section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).

(c) (3) (B)

28. (c)(3)(C) STEM OPT Eligibility Category. If you entered the eligibility category (c)(3)(C) in Item Number 27., provide the information requested in Item Numbers 28.a - 28.c.

28.a. Degree

28.b. Employer's Name as Listed in E-Verify

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. (c)(26) Eligibility Category. If you entered the eligibility category (c)(26) in Item Number 27., provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.

30. (c)(8) Eligibility Category. If you entered the eligibility category (c)(8) in Item Number 27., have you EVER been arrested for and/or convicted of any crime?

Yes No

NOTE: If you answered "Yes" to Item Number 30., refer to Special Filing Instructions for Those With Pending Asylum Applications (c)(8) in the Required Documentation section of the Form I-765 Instructions for information about providing court dispositions.

31.a. (c)(35) and (c)(36) Eligibility Category. If you entered the eligibility category (c)(35) in Item Number 27., please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in Item Number 27., please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.

31.b. If you entered the eligibility category (c)(35) or (c)(36) in Item Number 27., have you EVER been arrested for and/or convicted of any crime?

Yes No

NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.

Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the Penalties section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

Applicant's Statement

NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.

- 1.a. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- 1.b. The interpreter named in Part 4. read to me every question and instruction on this application and my answer to every question in , a language in which I am fluent, and I understood everything.
- 2. At my request, the preparer named in Part 5., , prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

- 3. Applicant's Daytime Telephone Number
- 4. Applicant's Mobile Telephone Number (if any)
- 5. Applicant's Email Address (if any)
- 6. Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

Applicant's Signature

Make sure that your signature stays "within" the box lines!

- 7.a. Applicant's Signature
- 7.b. Date of Signature (mm/dd/yyyy)

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

- 1.a. Interpreter's Family Name (Last Name)
- 1.b. Interpreter's Given Name (First Name)
- 2. Interpreter's Business or Organization Name (if any)

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Mailing Address

- 3.a. Street Number and Name
- 3.b. Apt. Ste. Flr.
- 3.c. City or Town
- 3.d. State 3.e. ZIP Code
- 3.f. Province
- 3.g. Postal Code
- 3.h. Country

Interpreter's Contact Information

- 4. Interpreter's Daytime Telephone Number
- 5. Interpreter's Mobile Telephone Number (if any)
- 6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language specified in Part 3., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.

Interpreter's Signature

- 7.a. Interpreter's Signature
- 7.b. Date of Signature (mm/dd/yyyy)

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

- 1.a. Preparer's Family Name (Last Name)
- 1.b. Preparer's Given Name (First Name)
- 2. Preparer's Business or Organization Name (if any)

Preparer's Mailing Address

- 3.a. Street Number and Name
- 3.b. Apt. Ste. Flr.
- 3.c. City or Town
- 3.d. State 3.e. ZIP Code
- 3.f. Province
- 3.g. Postal Code
- 3.h. Country

Preparer's Contact Information

- 4. Preparer's Daytime Telephone Number
- 5. Preparer's Mobile Telephone Number (if any)
- 6. Preparer's Email Address (if any)

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant
(continued)

Preparer's Statement

- 7.a. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- 7.b. I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited ay need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the Applicant's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy)

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. A-Number (if any) ▶ A-

3.a. Page Number 3.b. Part Number 3.c. Item Number

3.d. _____

4.a. Page Number 4.b. Part Number 4.c. Item Number

4.d. _____

5.a. Page Number 5.b. Part Number 5.c. Item Number

5.d. _____

6.a. Page Number 6.b. Part Number 6.c. Item Number

6.d. _____

7.a. Page Number 7.b. Part Number 7.c. Item Number

7.d. _____

e-Notification of Application/Petition Acceptance

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form G-1145
OMB No. 1615-0109
Expires 09/30/2016



What Is the Purpose of This Form?

Use this form to request an electronic notification (e-Notification) when U.S. Citizenship and Immigration Services accepts your immigration application. This service is available for applications filed at a USCIS Lockbox facility.

General Information

Complete the information below and clip this form to the first page of your application package. You will receive one e-mail and/or text message for each form you are filing.

We will send the e-Notification within 24 hours after we accept your application. Domestic customers will receive an e-mail and/or text message; overseas customers will only receive an e-mail. Undeliverable e-Notifications cannot be resent.

The e-mail or text message will display your receipt number and tell you how to get updated case status information. It will not include any personal information. The e-Notification does not grant any type of status or benefit; rather it is provided as a convenience to customers.

USCIS will also mail you a receipt notice (I-797C), which you will receive within 10 days after your application has been accepted; use this notice as proof of your pending application or petition.

USCIS Privacy Act Statement

AUTHORITIES: The information requested on this form is collected pursuant to section 103(a) of the Immigration and Nationality Act, as amended INA section 101, et seq.

PURPOSE: The primary purpose for providing the information on this form is to request an electronic notification when USCIS accepts immigration form. The information you provide will be used to send you a text and/or email message.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information may prevent USCIS from providing you a text and/or email message receiving your immigration form.

ROUTINE USES: The information provide on this form will be used by and disclosed to DHS personnel and contractors in accordance with approved routine uses, as described in the associated published system of records notices [DHS-USCIS-007 - Benefits Information System and DHS-USCIS-001 - Alien File (A-File) and Central Index System (CIS), which can be found at www.dhs.gov/privacy]. The information may also be made available, as appropriate for law enforcement purposes or in the interest of national security.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 3 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue, NW, Washington, DC 20529-2140. OMB No. 1615-0109. Do not mail your completed Form G-1145 to this address.

Complete this form and clip it on top of the first page of your immigration form(s).

Applicant/Petitioner Full Last Name Mouse	Applicant/Petitioner Full First Name Mickey	Applicant/Petitioner Full Middle Name
E-mail Address Mickey.Mouse@ColoradoCollege.edu		Mobile Phone Number (Text Message) +1 (719) 123-4567



Optional Practical Training (OPT) Request Form

SECTION A: To be completed by the student.

Family Name: _____ Given Name: _____

SEVIS ID Number: _____ Form I-20 Program End Date: _____

Email address: _____ Telephone: _____

I am applying for:

PRE-COMPLETION OPT

POST-COMPLETION OPT: You are expected to be employed full-time (at least 20 hours per week) while authorized for post-completion OPT. You must read and sign the attached post-completion OPT agreement and submit it with your OPT request form.

Please list any previous periods of Curricular Practical Training (CPT) or OPT:

Type (CPT or OPT)	Part-Time or Full-Time	Dates

Requested OPT Dates*: Start Date: _____ End Date: _____

*If you are applying for post-completion OPT, you may choose an employment start date as early as the day after your Colorado College program completion date, i.e. the date on which your CC degree requirements will be fulfilled, or as late as 59 days after the date on which you fulfilled your CC degree requirements. The end date of your OPT employment will be 12 months later or however many months of OPT authorization you have remaining.

SECTION B: This section must be completed by the student's academic advisor.

Student's CC ID: _____ Student's Major: _____

Level of Study: Bachelor's Master's

Student's Expected Program Completion Date*
(must be in mm/dd/yyyy format): _____

*Program completion date = the last day of final exams of the block or semester in which degree requirements are fulfilled OR the date on which all academic requirements for the awarding of the degree will be fulfilled, such as filing the thesis. DO NOT use the Commencement date, unless that date is the date on which the student will complete his/her final exams or file his/her thesis.

I confirm that the information provided in this section is correct. I recommend that this student be allowed to obtain Optional Practical Training authorization in order to secure a position in his/her field of study.

Advisor's Name: _____

Department: _____ Telephone: _____

Signature: _____ Email Address: _____

OPT Request Instructions

Submit the completed form on the reverse side of this page to request new I-20 from ISSS with a recommendation for OPT. You will receive the new OPT Form I-20 in 3 business days.

When to Apply for OPT

Apply early! You cannot submit a Form I-765 (Application for Employment Authorization) petition to the U.S. Citizenship and Immigration Services (USCIS) until you have received your new OPT Form I-20 from ISSS and then it takes about 3-4 months for the USCIS to process your Form I-765 application.

- The earliest the USCIS can receive your Form I-765 petition for *pre-completion OPT* is no more than 90 days before your requested OPT start date. For *post-completion OPT*, the earliest date the USCIS can receive your Form I-765 petition is 90 days before your expected program completion date.
- The latest the USCIS can receive a Form I-765 petition for post-completion OPT is the 60th day following your program completion date.
- It can take up to two weeks to prepare the OPT application before sending it to USCIS (especially for busy students!)

Your Program Completion Date

The “program completion date” for OPT purposes is defined as follows:

- For bachelor’s degree students: the last day of final exams of the block or semester in which degree requirements are fulfilled.
- For master’s degree students: the day on which all degree requirements are fulfilled, such as filing the thesis.

Changing your program completion date can cause serious complications for your OPT application. If for some reason you may need to change your program completion date after the OPT Form I-20 is created, speak with a Designated School Official in ISSS.

Maintaining F-1 Status While on OPT

- Employment must be directly related to your major.
- OPT is intended to enhance your academic program by providing a means to gain experience in your field of study. The USCIS considers working in a job that is not related to your major a violation of F-1 status.
- **Reporting changes of name, address or employment:** an F-1 student authorized by USCIS to engage in Optional Practical Training is required to report to the OIP office within 10 days of any change in the following:
 - Legal name;
 - Residential or Mailing Address;
 - Employer Name;
 - Employer Address; and/or
 - Periods of Employment/Unemployment

To report such changes, students are instructed to use the Student and Exchange Visitor Program (SEVP) Portal.

Periods of Employment

Once you complete your degree, you cannot work on-campus or off-campus until you have received an Employment Authorization Document (EAD) from USCIS and the employment authorization start date noted on the EAD has arrived.

Periods of Unemployment

During post-completion OPT, students may not accrue an aggregate total of more than 90 days of unemployment during any post-completion OPT carried out under the initial post-completion OPT authorization.



Applicants for post-completion OPT must complete and sign the statement below and then submit this agreement form to ISSS with their OPT Request Form.

Post-Completion Optional Practical Training (OPT) Agreement

By signing below, I understand that if I receive authorization from the U.S. Citizenship and Immigration Services (USCIS) for post-completion Optional Practical Training (OPT) employment, I am responsible for maintaining my legal F-1 student status in the United States by meeting the following requirements:

- Pursuing employment in a job directly related to my field of study and commensurate with my level of education.
- Not exceeding the 90-day limit on unemployment during any standard period of post-completion OPT authorization.
- Reporting a change of my residential address information to the Student and Exchange Visitor Program (SEVP) Portal within 10 days of moving.
- Reporting any changes in my OPT employment information (e.g., name and/or address of my employer, my dates of employment, etc.) to the Student and Exchange Visitor Program (SEVP) Portal.
- Contacting ISSS if I need to transfer to another institution, change my visa status, or complete my stay as an F-1 student in the United States.
- If I am an eligible STEM degree student, submitting a request for the 24-month extension of my OPT work authorization to ISSS before my current Employment Authorization Document (EAD) expires.
- Keeping my passport valid for six (6) months at all times.
- If my previous travel endorsement signature on Page 2 of my current Form I-20 is more than 6 months old, obtaining a new travel endorsement signature from a Designated School Official (DSO) in ISSS before any travel outside of the United States.
- Submitting required tax forms and paying any taxes due.

My signature below confirms that I understand and agree that if I fail to meet any of the requirements indicated above then I may jeopardize my legal status in the United States.

Signature: _____

Date: _____

