

# Optional Practical Training (OPT)

Information for students  
International Services

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# What is OPT?

OPT is an employment authorization permitting a work experience in your field of study at a U.S. company or organization up to 12 months.

# Types of OPT

## Pre-completion

- Allows up to 20 hours per week during school year; remain in full-course of study
- During school break, full-time or part-time permitted
- After completion of all course requirements while completing thesis or dissertation: eligible for full-time

## Post-completion

- Authorized full time employment after graduation/completion of program requirements
- All previous periods of OPT at the same level are deducted from the 12-month total. Part-time OPT is counted at a half-rate.

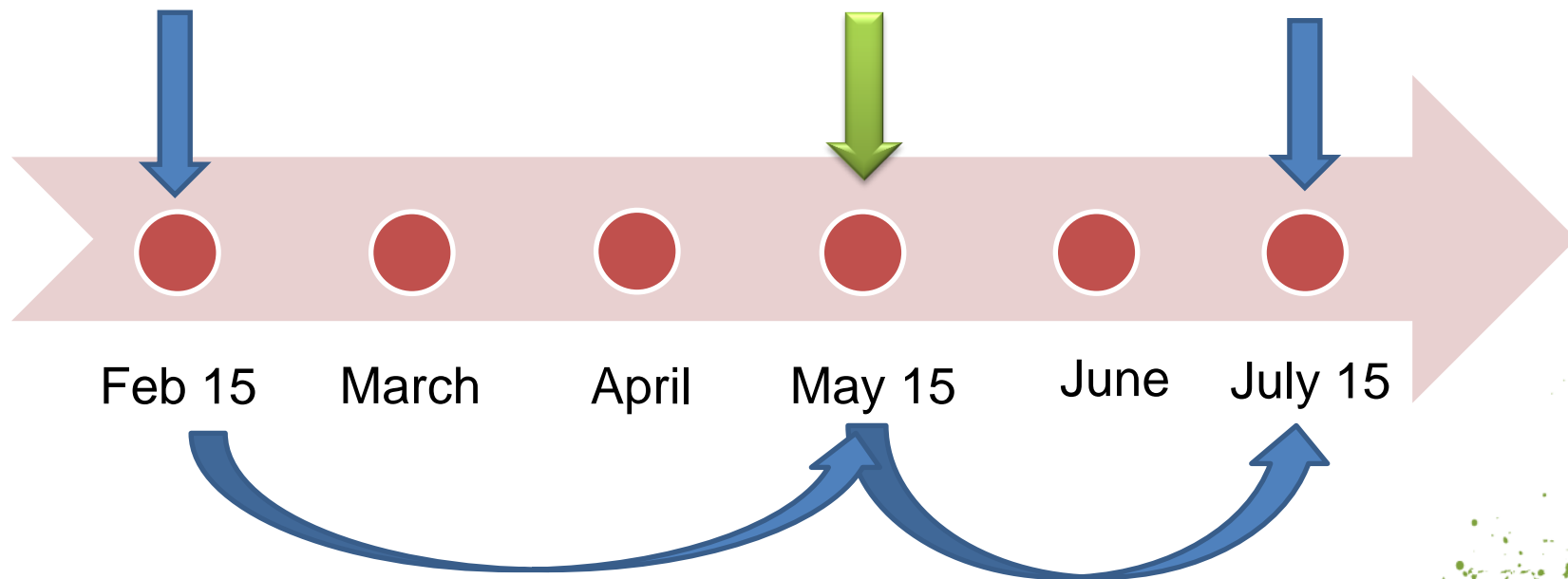
# Eligibility

- Must be a F-1 student who has been enrolled full-time for at least one academic year (9 months)
- Must graduate with a degree from MSU.
- Proposed employment must be directly related to the student's area of study.
- Not engaged in more than 12 months full time CPT at the current degree level
- Not authorized for 12 months of OPT at the current degree level

# When to Apply & Deadlines

- For post-completion OPT, USCIS can accept your application no earlier than **90** days before your program end date (end date on your I-20) and no later than **60** days following program completion.
- *Keep in mind that it will take 1-2 weeks for USCIS to receive your OPT application.*

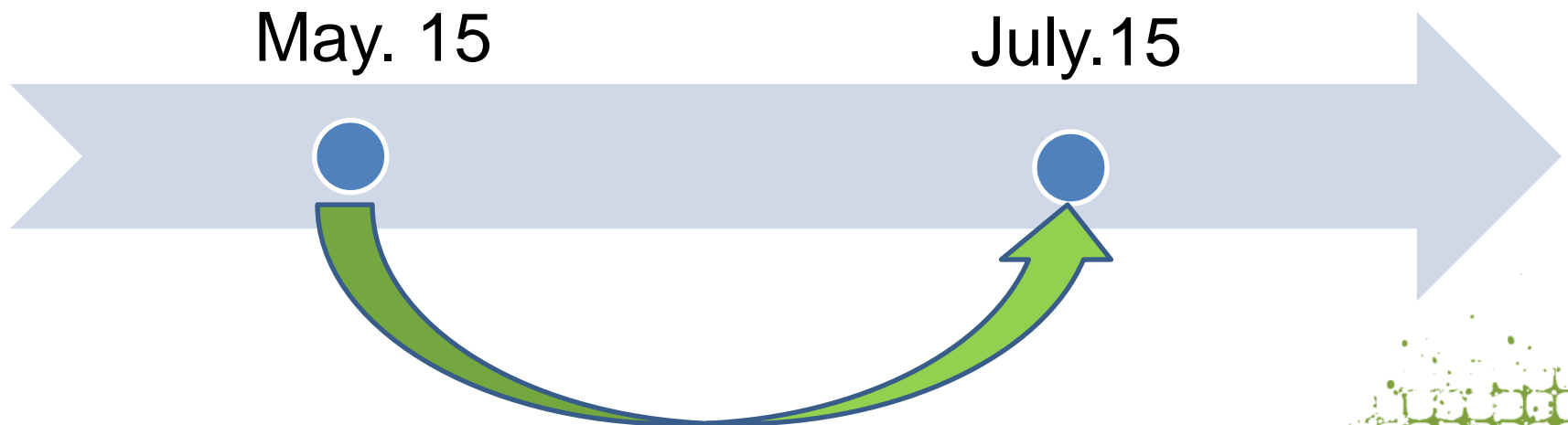
# When to Apply & Deadlines



# When to Apply & Deadlines

- OPT Start Date: Your OPT start date can be no later than **60** days (grace period) beyond your degree completion date.
- OPT End Date: One year from your start date minus a day. For example: 1/15/2014 – 1/14/2015
- OPT start date and end date **cannot** be changed once USICS receives your application.

# Pick OPT Start Date (for post completion OPT)





# How to keep your OPT status?

- The total unemployment time limit for students on post-completion OPT is 90 days. Exceeding the period of unemployment will violate your OPT status.
- Employment should directly relate to your major area of study.

# How to get your OPT I-20:

**Please turn in the following forms to IS office**

- OPT eligibility form- choose your OPT dates from aforementioned criteria
- Acknowledgement of Reporting Requirement during Post-Completion OPT
- I-765 (USCIS Form)
- G-1145 (Optional)

## OPT Eligibility Form

The top part of this page assists you in determining if you're eligible for OPT.

After reading the "Things to consider" segment of the OPT FAQs, indicate your chosen OPT start and end dates here:

*Your submitted OPT application indicates that you have read the OPT packet fully*

### Optional Practical Training (OPT) Eligibility

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

- 1) Have you been attending Missouri State University and continuously enrolled during the past academic year in F-1 status? Yes / No
- 2) Have you been awarded OPT previously? Yes No  
If yes, circle: Part Time/Full Time  
If yes, dates of authorization: \_\_\_\_/\_\_\_\_/\_\_\_\_ through \_\_\_\_/\_\_\_\_/\_\_\_\_  
Degree level at time of authorization: Bachelor/Master /Ph.D.  
School: \_\_\_\_\_
- 3) Have you been awarded CPT previously? Yes No  
If yes, circle: Part Time/Full Time  
If yes, dates of authorization: \_\_\_\_/\_\_\_\_/\_\_\_\_ through \_\_\_\_/\_\_\_\_/\_\_\_\_  
Degree level at time of authorization: Bachelor/Master /Ph.D.  
School: \_\_\_\_\_
- 4) Please indicate the dates you would like to request for OPT.
- 5) When will you complete your studies and/or graduate from Missouri State University in your current degree program? \_\_\_\_/\_\_\_\_/\_\_\_\_

Below, please indicate the dates for which you wish to apply for OPT. Your end date can be as late as exactly one year minus a day of the start date you choose (for example, "12/30/2014 to 12/29/2015". If your application for OPT is not received by USCIS within 60 to 90 days of the date you choose to begin your OPT, the date you choose for OPT may not be honored. For students who apply for OPT during the 60 day grace period, you run the risk of not being awarded a full period of OPT as USCIS has mandated that OPT must be completed within 14 months of your date of completion of studies. Please choose carefully the dates for which you wish to be engaged in OPT. Please read **carefully** the segment named "things to consider" on the OPT FAQs sheet.

If you are applying for OPT, International Services assumes that you are confidently asserting that you intend to graduate/complete your studies within the current semester OR that you graduated or completed your program of study within the last 45 days. It is your responsibility to know the information in this packet.

Requested OPT Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM/ DD /YYYY

End Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM/ DD /YYYY

## Acknowledgement of Reporting

## Acknowledgment of Reporting Requirement during post-completion OPT

The regulations require a student on OPT to report any change of name or address, or interruption of such employment to the Designated School Official (DSO) for the duration of the authorized training. Students are encouraged to report changes in employment to their DSO as soon as possible. Student and Exchange Visitor Program (SEVP) recommends that students report changes within 10 business days of the change to avoid situations where a Department of Homeland Security (DHS) official may determine the student is out of status. \*Students are required to report changes in residential address to their DSO within 10 days of moving.

- The regulations at 8 C.F.R. § 214.2(f)(12)(i) state that:

(i) General. An F-1 student authorized by USCIS to engage in optional practical training (OPT) is required to report any change of name or address, or interruption of such employment to the DSO for the duration of the authorized training.

### How to report employment information while on standard post-completion OPT (STEM extension included)

Situation	Student Reports to DSO
New job	<ul style="list-style-type: none"> <li>Name of the employer</li> <li>Start date of employment</li> <li>Mailing address for the employer</li> </ul>
Change to a new job (less than 10 days between jobs) →	<ul style="list-style-type: none"> <li>Name of the previous employer</li> <li>Ending date of the employment with the previous employer</li> <li>Name of the new employer</li> <li>Start date of new employment</li> <li>Mailing address for the new employer</li> </ul>
Student decides to exit the U.S. and complete his or her F-1 status prior to the end date of OPT	<ul style="list-style-type: none"> <li>Indicate "Completing OPT and exiting the United States"</li> <li>Date of exit</li> </ul>

Must report to our office if you changed your address, and any other employment information

Please email this to [InternationalServices@missouristate.edu](mailto:InternationalServices@missouristate.edu) or the DSO who recommended OPT (subject line – OPT Employment Info)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Student ID \_\_\_\_\_ Personal Email Address \_\_\_\_\_

*I have read and understand the above information. I understand that it is my responsibility to report changes in my employment information and residential address within 10 days.*

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

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

DSO's Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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I-765

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

**Do not write in this block.**

Remarks	Action Block	Fee Stamp
A#		
Applicant is filing under §274a.12 _____		
<input type="checkbox"/> Application Approved. Employment Authorized / Extended ( <i>Circle One</i> ) until _____ (Date). Subject to the following conditions: _____ (Date). Application Denied. <input type="checkbox"/> Failed to establish eligibility under 8 CFR 274a.12 (a) or (c). <input type="checkbox"/> Failed to establish economic necessity under 8 CFR 274a.12(c)(14), (18) and 8 CFR 214.2(f)		

I am applying for:  Permission to accept employment.  
 Replacement (of lost employment authorization document).  
 Renewal of my permission to accept employment (attach previous employment authorization document).

1. Name (Family Name in CAPS) (First) _____ (Middle) _____	Which USCIS Office? _____	Date(s) _____
2. Other Names Used (include Maiden Name) _____	Results (Granted or Denied - attach all documentation) _____	
3. U.S. Mailing Address (Street Number and Name) _____ (Apt. Number) _____ (Town or City) _____ (State/Country) _____ (ZIP Code) _____	12. Date of Last Entry into the U.S., on or about: (mm/dd/yyyy) _____	
4. Country of Citizenship/Nationality _____	13. Place of Last Entry into the U.S. _____	
5. Place of Birth (Town or City) _____ (State/Province) _____ (Country) _____	14. Status at Last Entry (B-2 Visitor, F-1 Student, No Lawful Status, etc.) _____	
6. Date of Birth (mm/dd/yyyy) _____ 7. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	15. Current Immigration Status (Visitor, Student, etc.) _____	
8. Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	16. Go to the "Who May File Form I-765?" section of the instructions. In the space below, place the letter and number of the eligibility category you selected from the instructions. (For example, (a)(8), (c)(17)(iii), etc.).  ( ) ( ) ( )	
9. Social Security Number (Include all numbers you have ever used, if any) _____	17. If you entered the eligibility category, (c)(3)(C), in Question 16 above, list your degree, your employer's name as listed in E-Verify, and your employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number in the space below. Degree: _____ Employer's Name as listed in E-Verify: _____ Employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number: _____	
10. Alien Registration Number (A-Number) or I-94 Number (if any) _____		
11. Have you ever before applied for employment authorization from USCIS? <input type="checkbox"/> Yes (Complete the following questions.) <input type="checkbox"/> No (Proceed to Question 12.)		

**Certification**

**Your Certification:** I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the "Who May File Form I-765?" section of the instructions and have identified the appropriate eligibility category in **Question 16**.

Signature \_\_\_\_\_ Telephone Number \_\_\_\_\_ Date \_\_\_\_\_

**Signature of Person Preparing Form, If Other Than Above:** I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

Print Name \_\_\_\_\_ Address \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Remarks	Initial Receipt	Resubmitted	Relocated		Completed		
			Received	Sent	Approved	Denied	Returned

Write in ink

Permission to accept employment

Last name first in CAPS, first name with first letter only in CAPS

Use mailing address that will be valid throughout the OPT process, which can be 2-3 months or more.

Do not write the date on the I-765 until AFTER you receive your OPT I-20.

**I-765, Application For  
Employment Authorization**

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

**Do not write in this block.**

Remarks	Action Block	Fee Stamp
A#		
Applicant is filing under §274a.12 _____		
<input type="checkbox"/> Application Approved. Employment Authorized / Extended ( <i>Circle One</i> ) until _____ (Date). Subject to the following conditions: _____ (Date). Application Denied. <input type="checkbox"/> Failed to establish eligibility under 8 CFR 274a.12 (a) or (c). <input type="checkbox"/> Failed to establish economic necessity under 8 CFR 274a.12(c)(14), (18) and 8 CFR 214.2(f)		

I am applying for:

Permission to accept employment.  
 Replacement (*of lost employment authorization document*).  
 Renewal of my permission to accept employment (*attach previous employment authorization document*).

1. Name (Family Name in CAPS) (First) (Middle) Which USCIS Office? Date(s)

2. Other Names Used (include Maiden Name) Results (Granted or Denied - attach all documentation)

3. U.S. Mailing Address (Street Number and Name) (Apt. Number) 12. Date of Last Entry into the U.S., on or about: (mm/dd/yyyy)

(Town or City) (State/Country) (ZIP Code) 13. Place of Last Entry into the U.S.

4. Country of Citizenship/Nationality 14. Status at Last Entry (B-2 Visitor, F-1 Student, No Lawful Status, etc.)

5. Place of Birth (Town or City) (State/Province) (Country) 15. Current Immigration Status (Visitor, Student, etc.)

6. Date of Birth (mm/dd/yyyy) 7. Gender  Male  Female

8. Marital Status  Married  Single  Widowed  Divorced

9. Social Security Number (include all numbers you have ever used, if any) 16. Go to the "Who May File Form I-765?" section of the instructions. In the space below, place the letter and number of the eligibility category you selected from the instructions. (For example, (a)(8), (c)(17)(ii), etc.)

10. Alien Registration Number (A-Number) or I-94 Number (if any) ( ) ( ) ( )

11. Have you ever before applied for employment authorization from USCIS? 17. If you entered the eligibility category, (c)(3)(C), in Question 16 above, list your degree, your employer's name as listed in E-Verify, and your employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number in the space below.

Yes (Complete the following questions.)  No (Proceed to Question 12.)

Degree: \_\_\_\_\_  
 Employer's Name as listed in E-Verify: \_\_\_\_\_  
 Employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number: \_\_\_\_\_

**Certification**

**Your Certification:** I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the "Who May File Form I-765?" section of the instructions and have identified the appropriate eligibility category in Question 16.

Signature Telephone Number Date

**Signature of Person Preparing Form, If Other Than Above:** I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

Print Name Address Signature Date

Remarks	Initial Receipt	Resubmitted	Relocated		Completed		
			Received	Sent	Approved	Denied	Returned

Enter "F1"

Enter "Student"

- (c) (3) (B) post-completion OPT
- (c) (3) (A) pre-completion OPT
- (c) (3) (C) STEM OPT Extension

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# Checklist for other documents

Please bring the following items with you when you pick up you OPT I-20

- \$380 Check made out EXACTLY to “*U.S. Department of Homeland Security*”
- 2 passport-style photos. Photo should be taken within 30 days of application. Write name and I-94 number lightly in pencil on the back.
- Copies of I-94, visa, passport pages and all former I-20s.

# After Application

- You will receive a Receipt Notice (I-797) in the mail from USCIS. You can check your case status at [My Case Status](#)
- USCIS averages 60-90 days to determine the outcome of your OPT application (60- <90: early apps; 75- >90 for end of semester apps; apps received during 60 day grace period)
- If your application is approved by USCIS you will receive the Employment Authorization Document (EAD). Please arrange to mail your EAD to a **reliable address**. Replacement EADs require a new OPT application and fee.



# After Application

- The dates on your EAD usually coincide with the dates requested by you and approved by USCIS.
- ***IMPORTANT!*** Do not work until EAD is in hand and the start date is reached. You are only authorized to work between the start and end dates authorized on the EAD.
- If your EAD is lost or stolen, contact our office immediately. Do not work without talking to us first.

For additional questions, please visit the Official Website of the Department of Homeland Security at [www.uscis.gov](http://www.uscis.gov)

For any other questions please email to [internationalservices@missouristate.edu](mailto:internationalservices@missouristate.edu)