

## A member of Minnesota State

## Optional Practical Training (OPT) Request Form

OPT is temporary work authorization that gives F-1 students an opportunity to apply knowledge gained in the classroom to a practical off-campus work experience in the student's field of study for a maximum duration of 1 (one) year per educational level.

Academic Advisor Signature: \_\_\_

i o be compieted	n by the student:	
Personal Informa	tion	
Metro State ID #:		Date of Birth:(month)/(day)/(year)
Last Name( <i>surnar</i>	me):	First Name(given):
Personal Email:		U.S. Phone number:
Physical Address i	n MN:( <i>Please verify your address <u>here</u></i>	and type exactly as you see it on the website)
Street Address:		Apt/Suite/Other:
City:	State:	ZIP Code:
Academic Inform	ation	
Level of Study:	(Undergraduate/Bachelors)	(Graduate/Masters)
Major of Study:		CIP Code:
Previous Employi	ment Information	
Have you participa	ated in Full-Time CPT:	If yes, how many days?
Have you previous	sly had OPT authorization?	If yes, when and at what level?
Have you had any	other off campus work authorization	? If yes, when and what type?
OPT Employment	t Information	
Requested OPT St	art Date:	Requested OPT End Date:
Student Signatur	е	
as listed on my 1-2	20, and I understand that working wit. ermination of my F-1 status. I understo	employment I pursue will be related to my course of study hout authorization constitutes illegal employment and and the requirement of reporting all employment to Metro
Student Signatur	e:	Date:
To be completed	d by the student's academic advi	isor
Degree Conferral		301.
3	r of degree completion:	
,		if within 90 days before the end of the semester) or has
-	nin 60 days after the end of the semes	
Graduate/Ma	asters student is completing (if within	90 days before the end of the semester) or has completed
(if within 60 days o	after the end of the semester) all degr	ree requirements.
Graduate/Ma	asters student is completing ( <i>if within</i>	90 days before the end of the semester) or has completed
(if within 60 days after the end of the semester) all degree requirements, EXCEPT their culminating		
	n/capstone/thesis, etc.	
Academic Adviso	•	
	e verified that the above listed inform ELS report.	ation is true and correct according to my review of the

Date: \_\_\_