UC RIVERSIDE | International Students and Scholars

OPT Request Form

ITEMS TO INCLUDE

- ☐ This completed OPT Request Form
- ☐ Copy of Passport Biographical Page
- ☐ Copy of I-94

Note: ISS OPT Fee $100.00. Once your application has been submitted, ISS will email you with payment instructions.

STUDENT INFORMATION

To be completed by the student

Family Name: _____ Given Name: _____

Student ID #: _____ Cell #: _____

Major: _____ Degree: _____

OPT REQUEST INFORMATION

To be completed by the student

Important OPT Date Guidelines

- OPT Start date must be within 60-day grace period after your completion date.
- OPT End Date is 364 days after your OPT Start Date.

Requested Start Date: _____ Request End Date: _____

Date of OPT Workshop Completion (if attended): _____

Have you Applied for OPT Before? ◯ Yes ◯ No

PREVIOUS AUTHORIZED EMPLOYMENT (If Applicable)

To be completed by the student

Please list previous authorized employment and include copies of the relevant I-20s.

Previous Authorized Employment #1 (If Applicable)

Type of employment: ◯ CPT ◯ OPT

Was your Employment Part-Time or Full-Time? ◯ Part-Time ◯ Full-Time

Employment Dates Start Date: _____ End Date: _____

Previous Authorized Employment #2 (If Applicable)

Type of employment ◯ CPT ◯ OPT

Was your Employment Part-Time or Full-Time? ◯ Part-Time ◯ Full-Time

Employment Dates Start Date: _____ End Date: _____

Previous Authorized Employment #3 (If Applicable)

Type of employment ◯ CPT ◯ OPT

Was your Employment Part-Time or Full-Time? ◯ Part-Time ◯ Full-Time

Employment Dates Start Date: _____ End Date: _____

Additional Comments:

ADVISOR VERIFICATION

To be completed by the Academic Advisor or Graduate Program Advisor

Expected Degree Completion Date for the Student Named Above: _____

Advisor Signature: _____ *Date*: _____

Advisor Name: _____ Title: _____

School/Department: _____

Comments: