UNIVERSITY REGISTRAR
FLORIDA POLYTECHNIC UNIVERSITY

Optional Practical Training (OPT) Request

F-1 students must submit this form to ISS to request OPT I-20 with DSO recommendation for pre-completion (pre-OPT) or post-completion OPT (post-OPT).

PROCESS STEPS REMINDER

- ✓ Complete OPT **CANVAS** course and pass the quiz with 100% or less (unlimited attempts).
- ✓ Submit OPT Request with **Steps 1-5** completed then submit to **ISS** (this form).
- ✓ File online **I-765 application** with USCIS within 30 days of OPT I-20 issue date and pay the filing fee of $470 (***USCIS will deny I-765s submitted more than 30 days after this date***).

ISS PROCESSING

I-20s are sent electronically via your university email. Students who prefer to pick up a paper I-20 in person, or to have someone pick it up on their behalf must submit their request in writing (via email). Individuals picking up on your behalf must provide a valid photo ID. Complete OPT I-20 requests are issued within 1 -3 days business days after being received.

STEP 1: STUDENT INFORMATION

SEVIS ID:_____ University ID: _____

Last Name:_____ First Name: _____

Current Street Address (US): _____ Apt/Room#: _____

City: _____ State: _____ Zip: _____

Personal Email:_____ Phone: _____

Major/Concentration:_____ **Check one:** ☐ Bachelor's Degree ☐ Master's Degree

STEP 2: SELECT TYPE OF OPT REQUEST

Select desired start date I-765 Application with USCIS; can be no more than 1 to 59 days after I-20 program end date. This date cannot be changed once the I-765 application is filed.

Desired OPT Start Date: _____ *(USCIS may adjust this date after application approval)*

☐ Pre-completion OPT | Code (C)(3)(A) ☐ Part-Time ☐ Full-Time ***Employment starts/end before program completion.**

☐ Post-completion OPT | Code (C)(3)(B) ☐ Part-Time ☐ Full-Time ***Employment starts after program completion.**

STEP: 3 IDENTIFY PRIOR CPT or OPT USED AT CURRENT EDUCATION LEVEL

☐ **None – move to Step 4**

Prior CPT Authorizations:

Start Date: _____ End Date: _____ ☐ Part-Time ☐ Full-Time

Start Date: _____ End Date: _____ ☐ Part-Time ☐ Full-Time

Prior OPT Authorizations:

Start Date: _____ End Date: _____ ☐ Part-Time ☐ Full-Time

Start Date: _____ End Date: _____ ☐ Part-Time ☐ Full-Time

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STEP 4: VERIFICATION OF EMPLOYMENT

Please check the applicable box, complete Step 5 then forward form to the Assistant Registrar so they may complete Step 6. The Assistant Registrar will complete Step 6 and forward OPT Request to ISS for approval.

☐ I do not have an OPT employment offer yet *(move to Step 5)*.

☐ I do have an OPT employer offer – **attach required employer offer letter and explain how your position relates to your field of study** *(then move to Step 5)*: _____

_____

STEP 5: STUDENT CERTIICATION

My signature certifies the validity of the information submitted on this form, that I have completed the required OPT course in CANVAS, and meet all criteria for applying for OPT. I understand:

- My submission of this application does not guarantee authorization to work off-campus; I must be approved by USCIS, receive my EAD card, and secure employment that meets USCIS criteria to be eligible.
- I must complete my online I-765 **within 30 days** of the date my DSO issues my I-20 recommending OPT.
- I am responsible for monitoring my I-765 application status and contacting USCIS if I have questions.
- I understand that when I file the I-765 with USCIS I will have the option to identify if I have social security number (SSN) or not. If I do not, they will file an application on my behalf.

Student Signature/Date: _____

Remember, the next step is to forward this form to the Assistant Registrar so they may complete Step 6. The Assistant Registrar will complete Step 6 and forward your OPT Request to ISS for final processing.

STEP 6: VERIFICATION OF ACADEMIC STANDING– must be completed by Assistant Registrar

The Assistant Registrar or other designed authority must complete Step 4 to confirm if the student is in good academic standing, has completed one academic year, and is eligible for graduation (post-opt). Please return to ISS or contact them if there are further questions.

Please check the applicable box(es) below:

I confirm the following regarding the student's status for _____ (term/year):

☐ **Good Academic Standing** ☐ **Completed One Academic Year**

☐ **Not in Good Academic Standing** ☐ **Did Not Complete One Academic Year**

☐ **Post-OPT only:** **Eligible to graduate** _____ (term/year)

Additional Comments: _____

_____

Signature/Date:_____