

Pre-completion OPT I-20 Recommendation Request Form

Please submit this form to the International Affairs Department at intlservices@westcliff.edu.

Section A (Student must complete)

Personal Information:

Last Name _____ First Name _____ Middle Initial _____

SEVIS ID: _____ Student ID: _____

Date of Birth (MM/DD/YYYY): _____ Tel: _____

Email: _____ Field of Study: _____

Program Start Date: _____ Program End Date: _____

Pre-Completion OPT Information:

Requested Dates for Pre-Completion OPT	
Start Date (MM/DD/YY):	End Date(MM/DD/YY):
Type of Employment	
<input type="checkbox"/> Full Time (more than 20 hours per week) *(During break only)	<input type="checkbox"/> Part-Time (Less than 20 hours per week) *(While school is in session or during break)

Internship Information:

Company Name: _____

Company address: _____
street
city
state
zip code

Internship position (or division): _____

Supervisor Name: _____ Supervisor Title: _____

Supervisor Email: _____ Supervisor Phone: _____



Office Use Only: Date Received: _____
Date Completed: _____

Section B (Student must complete)

Eligibility Check List:

Have you applied for OPT before?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify which degree level: <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate's
Have you completed one FULL academic year?	<input type="checkbox"/> Yes <input type="checkbox"/> No If you have completed one full academic year, please specify details: Institution Name: _____ Date completed: _____ Number of units/credits completed: _____
Do you currently have CPT?	<input type="checkbox"/> Yes <input type="checkbox"/> No

I understand the requirements of OPT, it is my sole responsibility to update Westcliff University immediately of any changes in address or employment changes. I understand that all periods of pre-completion OPT are deducted from the standard 12 months of OPT that is allotted to me. I affirm that the information provided is true and will be held accountable for any false information printed.

Student Signature: _____ Date: _____

Office Use Only:
Date Received:

Date Completed:

Post-Completion OPT Application Checklist

In order to apply for Post-completion OPT, please make sure that you have met the following:

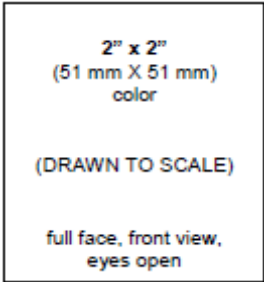
- You are in lawful and active F-1 status.
- You have received a graduation notice and are qualified for graduation.
- You have completed all coursework requirements for the degree by the start of OPT.

Students can apply for OPT as early as 90 days prior to their program completion date, but no later than 60 days after their program completion date.

Required Documents for OPT application

Gather the following before making an OPT application appointment (do not staple your documents together). Make sure to photocopy your entire application for your records.

- Completed Optional Practical Training Request form.
- Copy of Passport
- Copy of Visa
- Copy of I-94 printout (download at <https://i94.cbp.dhs.gov/>)
- Completed G-1145 (downloadable at <https://www.uscis.gov/g-1145>)
 - Typed, not handwritten
 - (optional, but highly recommended)
- Completed I-765 form (download at <https://www.uscis.gov/i-765>).
 - Typed, not handwritten
 - **Use blue ink to sign name in the signature box. Ensure the signature stays within the box.**
- Two Passport-Style Photos
 - Write your name and I-94 number on the back of each photo
 - Do not use photos from your home country
 - Photos must be taken within the last 30 days
 - Plain white or off-white background.




*Lightly write your name on the back with a pencil or felt-tip pen.

- Copies of all previous I-20s in chronological order with most recent on top
 - Include all previously issued CPT I-20s and OPT I-20s as well.

Office Use Only:
Date Received:

Date Completed:

- Do not copy the instructional pages
- Check for \$410 made payable to Department of Homeland Security
 - Check must be a U.S. check drawn on U.S. bank but does not need to be from your own account

	John Doe 4199 Campus Drive, #650 Irvine, CA 92612	Date Today's Date (mm/dd/yy)	650
PAY TO THE ORDER OF	U.S. Department of Homeland Security		\$410.00
Four hundred ten dollars and 00/1000			DOLLARS
MEMO	I - 765 N0001234567 (Your SEVIS ID #)	Signature	
I: 0123456789 I: 1001001234 11		0650	

- Copies of any prior EAD cards (if applicable)
- Recommended: Documentation from the International Affairs Department indicating current academic status and expected date of completion of studies. A one to two sentence letter is sufficient.
- If applicable, include:
 - Photocopies of all previously issued OPT I-20s