

Optional Practical Training (OPT) Application Packet

What to Submit to ISS for the OPT I-20 (single-sided copies only; do not staple)

- 1. **OPT Application Request Form**
- 2. **Form G-1145, E-Notification** (go to uscis.gov to complete form & print)
- 3. **Form I-765 (7 Page Version Only)**; go to uscis.gov to complete form & print; do not e-file)
- 4. **Copy of Unexpired Passport**
- 5. **Copy of I-94** (for white card version, copy front & back; for online version, go to www.cbp.gov/i94 to print)
- 6. **Copy of all previously issued I-20s** (do not copy instruction page; do NOT staple pages)
- 7. **Copy of any previously issued EAD cards, if any** (Employment Authorization Documents)
- 8. **If applicable (certain grad students only)**, proof of satisfying EWP requirement (English Writing Proficiency)

Additional Requirements for USCIS Only (not to be submitted to ISS)

- 1. **TWO U.S. Passport Style Photos** taken within last 30 days.
Place photos in a small envelope with your name & SEVIS# on the envelope.
- 2. **Personal check or money order for \$410.00** (Four hundred and ten dollars only).
Payable to US Department of Homeland Security.

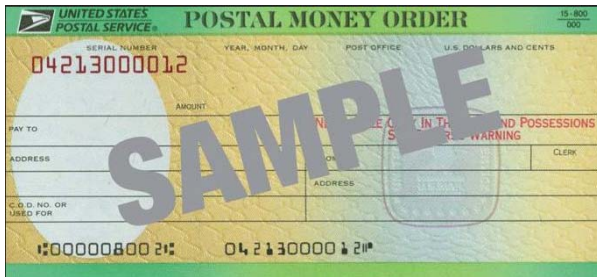
US PASSPORT PHOTO REQUIREMENTS

Taken from **Page 20** of I-765 Instructions: <https://www.uscis.gov/sites/default/files/files/form/i-765instr.pdf>

You must submit two identical color passport-style photographs of yourself taken recently. The photos must have a white to off-white background, be printed on thin paper with a glossy finish, and be unmounted and unretouched.

The two identical passport-style photos must be 2 by 2 inches. The photos must be in color with a full face, frontal view, on a white to off-white background. Head height should measure 1 to 1 3/8 inches from the top of your hair to the bottom of your chin, and eye height is between 1 1/8 to 1 3/8 inches from the top of your eyes to the bottom of photo. Your head must be bare unless you are wearing headwear as required by a religious denomination of which you are a member. Using a pencil or felt pen, lightly print your name and A-Number (if any) on the back of the photo.

SAMPLE OF MONEY ORDER:

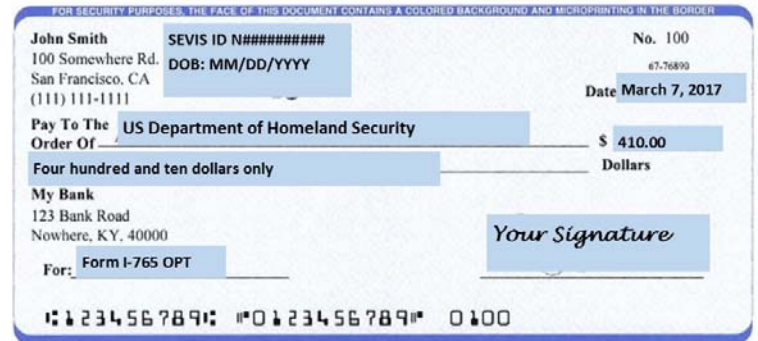


Fill out a Money Order from the **US Post Office:**

Pay To: US Department of Homeland Security
Address: USCIS, P.O. Box 21281, Phoenix, AZ, 85036
Amount: \$410
From or Purchaser of Sender: Your First Name, Your Last Name
Address: Your U.S. Address

Leave the back completely blank. Write your SEVIS ID Number and Date of Birth somewhere on the front of the money order.

SAMPLE PERSONAL CHECK:



Fill out a non-USPS Money Order (**from 7-11, CVS, etc.:**)

Pay To: US Department of Homeland Security
Amount: \$410
From or Purchaser of Sender: Your First Name, Your Last Name
Address: Your U.S. Address

Leave the back of the check completely blank. Write your SEVIS ID Number and Date of Birth somewhere on the front of the check.

What to Expect Next

1. **ISS will create your OPT I-20 and contact you via email or telephone when it is ready for delivery/pick-up.**
2. **You will receive the following with your OPT I-20:**
 - a) documents that you submitted to ISS for the OPT I-20, which may include Advisor edits for your documents
 - b) instructions for finalizing your OPT packet
 - c) where and how to mail the completed packet to USCIS
 - d) what to do while you wait for the EAD card, how to track the progress with USCIS and deal with possible delays or requests for further information
 - e) instructions for maintaining status while on active OPT and what you must report to ISS throughout your training period.

Guidelines for Completion Form I-765 for Pre- or Post-Completion Optional Practical Training (OPT)

To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).	<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney or Accredited Representative USCIS Online Account Number (if any) <input style="width: 100%;" type="text"/>
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Leave this section blank. Skip this section and go to Part 1. Reason for Applying.

PART 1. Reason for Applying:

▶ START HERE - Type or print in black ink.

Part 1. Reason for Applying

I am applying for (select only one box):

1.a. Initial permission to accept employment.

Select 1a.

PART 2. Information About You

Your Full Legal Name = Must match how your name appears on your Form I-20.

Part 2. Information About You

Your Full Legal Name

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

Family Name = Surname on Form I-20
Given Name = same as Given Name on Form I-20
Middle Name = leave blank

Other Names Used: Only complete this next section if you have another legal name that appears in current or previous Passport, or visa, or Form I-20.

Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 6.

Additional Information.

2.a. Family Name (Last Name)

2.b. Given Name (First Name)

2.c. Middle Name

3.a. Family Name (Last Name)

3.b. Given Name (First Name)

3.c. Middle Name

4.a. Family Name (Last Name)

4.b. Given Name (First Name)

4.c. Middle Name

If no other legal name, then items 2a-4c, type "N/A".

Your U.S. Mailing Address:

- **USCIS will use your US Mailing Address to send your Employment Authorization Document (EAD), if application is approved.**
- If your mail is sent to someone other than yourself, then do following:

Your U.S. Mailing Address

5.a. In Care Of Name (if any)

5.b. Street Number and Name

5.c. Apt. Ste. Flr.

5.d. City or Town

5.e. State 5.f. ZIP Code
[\(USPS ZIP Code Lookup\)](#)

6. Is your current mailing address the same as your physical address?
 Yes No

NOTE: If you answered "No" to Item Number 6., provide your physical address below.

U.S. Physical Address

7.a. Street Number and Name

7.b. Apt. Ste. Flr.

7.c. City or Town

7.d. State 7.e. ZIP Code

5.a. Provide person's name under "In Care of Name".

Item 6: Click on **NO**.
If you answered "No" then you must provide your Physical US Address for 7.a.-7.e.

US Physical Address (items 7a-7e) cannot be blank.

- It is acceptable to you use a US Post Office address as your mailing address. See sample below.

Your U.S. Mailing Address

5.a. In Care Of Name (if any)

5.b. Street Number and Name

5.c. Apt. Ste. Flr.

5.d. City or Town

5.e. State 5.f. ZIP Code
[\(USPS ZIP Code Lookup\)](#)

6. Is your current mailing address the same as your physical address?
 Yes No

NOTE: If you answered "No" to Item Number 6., provide your physical address below.

U.S. Physical Address

7.a. Street Number and Name

7.b. Apt. Ste. Flr.

7.c. City or Town

7.d. State 7.e. ZIP Code

Item 5a: Provide your name.

Item 5b-5f: Provide PO Box address.
No punctuation marks.

Item 6: Click on **No**.
If you answered "No" then you must provide your Physical US Address for 7.a.-7.e.

US Physical Address (items 7a-7e) cannot be blank.
You cannot use a PO Box address for US Physical Address.

- If your US Mailing Address is the same as your US Physical Address then do the following:

Your U.S. Mailing Address	
5.a. In Care Of Name (if any)	<input type="text"/>
5.b. Street Number and Name	<input type="text" value="678 Nutwood"/>
5.c. <input checked="" type="checkbox"/> Apt. <input type="checkbox"/> Ste. <input type="checkbox"/> Flr.	<input type="text" value="C9"/>
5.d. City or Town	<input type="text" value="Fullerton"/>
5.e. State <input type="text" value="CA"/>	5.f. ZIP Code <input type="text" value="92831"/>
(USPS ZIP Code Lookup)	
6. Is your current mailing address the same as your physical address?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
NOTE: If you answered "No" to Item Number 6., provide your physical address below.	
U.S. Physical Address	
7.a. Street Number and Name	<input type="text"/>
7.b. <input type="checkbox"/> Apt. <input type="checkbox"/> Ste. <input type="checkbox"/> Flr.	<input type="text"/>
7.c. City or Town	<input type="text"/>
7.d. State <input type="text"/>	7.e. ZIP Code <input type="text"/>

Item 5a: Leave blank.

Items 5b, 5c (if applicable), 5d, 5e, and 5f: Provide info.

Item 6: Click on **YES**.

US Physical Address
Items 7a-7e: Leave blank

Go to next section, **Other Information**.

Other Information

Item 8. Alien Registration Number (A-Number) (if any) = Leave blank. Do not put I-94 number.

Item 9. USCIS Online Account Number (if any) = Leave blank. Do not put I-94 number.

Item 10 & 11: Please provide your appropriate responses.

Item 12. Have you previously filed Form I-765?

- If you have applied for Optional Practical Training or Economic-hardship based Employment Authorization before, then select "Yes". You must have copies of previous EADs.
- If this is your first time submitting Form I-765, then select "No".

Items 13a-17b related to Social Security Information.

If you already have a Social Security Number, then do the following:

- Item 13a: Select "Yes".
- Item 13b: Provide your Social Security Number.
- Skip to next section, **Your Country or Countries of Citizenship or Nationality**.

If you do not have a Social Security Number, then do the following:

- Item 13a: Select "No".
- Skip to Item 14.
- Items 14 -17b: *optional*; you are not required to request an SSN using this application.

Your Country or Countries of Citizenship or Nationality:

- Item 18a = Provide name of the country where you are currently a citizen or national (Passport Country). If you are a citizen of only one country then leave Item 18b blank and skip to **Place of Birth** section.
- Item 18b = If you are a citizen of more than one country, provide name of the country that issued your last passport.

Place of Birth:

- Item 19a: Please provide your appropriate response.
- Item 19b: Please provide your appropriate response. If no state/province, then type “N/A”.
- Item 19c: Please provide your appropriate response.
- Item 20: Date of Birth (mm/dd/yyyy) Example: 12/24/1998 = December 24, 1998

Information About Your Last Arrival in the United States

- Item 21a: Form I-94 Arrival-Departure Record
- Item 21b: Passport Number of your most recently issued passport
- Item 21c: Type “None”.
- Item 21d: Country that issued your passport
- Item 21e: Expiration Date for Passport (mm/dd/yyyy)
- Item 22: Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)
- Item 23: Place of Your Last Arrival into the United States
- Item 24: Immigration Status at Your Last Arrival (Example, F-1 student)
- Item 25: Current Status at your last arrival (Example: F-1 student)
- Item 26: Provide your SEVIS ID#. Check your Form I-20 for this.

Information About Your Eligibility Category

- Item 27:
 - For Pre-Completion Optional Practical Training
(c) (3) (A)
 - For Post-Completion Optional Practical Training.
(c) (3) (B)
- Items 28 – 31b: Leave blank; skip and go to Part 3, Page 4.

PART 3: Applicant’s Statement, Contact Information, Declaration, Certification, and Signature

- **Applicant’s Statement:** Item 1a. Select this by placing an “X”.
- **Applicant’s Contact Information:**
 - Items 3 & 4 = Provide your phone numbers (no symbols)
 - Item 5 = Provide your email address.
 - Item 6 = Respond if applicable.
- **Applicant’s Declaration and Certification**
- **Applicant’s Signature**
 - Item 7a = **Use black ink pen to sign in this box.**
 - Item 7b = **Use black ink pen to print date of mailing your packet to USCIS.**

PART 4 and PART 5 = Leave blank.

PART 6. Additional Information

This part is to be completed only if you are providing additional information and documents to USCIS, such as any of the following listed below:

- Copy of Previous Form I-20 showing Curricular Practical Training granted
- Copy of Previous Form I-20 showing Pre-Completion Optional Practical Training (for current degree or previous degree)
- Copy of Previous Form I-20 showing Optional Practical Training recommended based on other degree program
- Copy of Previous Form I-20 showing recommendation for Off-Campus Employment Authorization due to Severe Economic Hardship
- Copies of previous Employment Authorization Documents (EADs)

If you have any of these documents, then complete Part 6 as follows:

- Item 1a = Using black ink pen, print your Surname as it appears on your I-20
- Item 1b = Using black ink pen, print your Given name as it appears on your I-20
- Item 1c = Type "N/A"
- Item 2 = Leave blank.

SAMPLE OF HOW TO COMPLETE Items 3a-3d.

If providing copies of previous Form I-20's showing Curricular Practical Training (CPT), then do the following:

- 3a. Page Number = 3
- 3b. Part Number = 2
- 3c. Item Number = 27
- 3d. See sample below

3.a. Page Number	3.b. Part Number	3.c. Item Number
3	2	27
3.d. SEVIS ID# N1234567890; Part-time		
Curricular Practical Training granted;		
Master's degree; 02/01/2016 to		
05/11/2016		

SEVIS ID Number;

Specify if part-time or full-time Curricular Practical Training;

Specify your Academic Program when CPT was granted;

Include CPT start and end Dates

If providing copies of previous Form I-20 showing Optional Practical Training (OPT) for either current or previous degree, then do the following:

4.a. Page Number	4.b. Part Number	4.c. Item Number
3	2	27
4.d. SEVIS ID# N1234567890; Post-Completion		
Optional Practical Training;		
Bachelor's degree; 06/15/2012 to		
06/14/2013		

SEVIS ID Number;

Specify if Part-time or Full-time Pre-Completion or Post-Completion Practical Training;

Specify your Academic Program when OPT was recommended;

Include OPT start and end dates.

If providing copy of previous Employment Authorization Document, then do the following:

SAMPLE FOR EAD for Previous OPT

5.a. Page Number	5.b. Part Number	5.c. Item Number
3	2	27
5.d. SEVIS ID# N1234567890; Employment Authorization Document for Post- completion Optional Practical Training; Bachelor's degree; 06/15/2012 to 06/14/2013		

SEVIS ID Number;

Employment Authorization Document for Post-Completion Optional Practical Training;

Academic Program when OPT was recommended;

OPT start and end dates as they appear on the EAD

SAMPLE FOR EAD for Economic Hardship-based EAD

5.a. Page Number	5.b. Part Number	5.c. Item Number
3	2	27
5.d. SEVIS ID# N1234567890; Employment Authorization Document for Severe Economic Hardship; 01/10/2010 to 01/09/2011		

SEVIS ID Number;

Employment Authorization Document for Severe Economic Hardship;

Academic Program when OPT was recommended;

start and end dates as they appear on the EAD



Statement of Understanding - Optional Practical Training

I certify that I have read the appropriate materials regarding Optional Practical Training (OPT) available from the International Student Services (ISS). I understand the following information.

Pre-Completion OPT

- Approved Pre-Completion OPT time will be subtracted from total 12-month allocation of Post-Completion OPT, even if I do not use (or work) all of the Pre-Completion OPT time approved.
- Any extensions will require another separate OPT application, application fee and USCIS processing time (3 months average).

While Waiting for Approval of Application

- If working on campus during my final semester (or term) of enrollment, I must stop working once I graduate. In other words, my last day of work on-campus is the last day of the semester (or term) I graduate.
- I may not begin employment until I receive the valid Employment Authorization Document (EAD) from USCIS **and** the effective start date of OPT on the EAD has occurred.

Not Graduating/Cancelling or Withdrawing OPT Application

- **If I am unable to graduate as expected, I must consult with an International Student Advisor or Assistant Director *immediately*.**
- USCIS application fee is NOT refundable.
- I may not withdraw my application if USCIS has already processed the OPT work permit.
- Additionally, I may NOT be able to work full-time. I understand that I am subject to the 90-day unemployment rule if I am not employed at least part-time (20 hours per week) after my OPT approved start date.

My Reporting Requirements when on approved Post-Completion OPT

I am responsible for reporting any changes to my employment, address, and/or name **within 10 days** by submitting the information using the "OPT Employer Information" web form available on the ISS website: international.fullerton.edu

Unemployment Rule (applicable to student on approved Post-Completion OPT)

I understand that I may be considered out of status if I have not worked for 90 days or more (cumulative) while on approved OPT period.

Studying While on Post-Completion OPT or OPT STEM Extension

I understand that I cannot attend school full-time while on Optional Practical Training.

Termination of Optional Practical Training

Optional Practical Training is automatically terminated when I transfer to another school OR if I begin study at another educational level.

Travel Restrictions

I understand the risks involved if I choose to travel before and after my OPT has been approved.

Health Insurance Coverage

I am responsible for carrying adequate health insurance coverage for the duration of my OPT.

OPT STEM Extension or Changing to H1B Status

I will contact the ISS Office regarding OPT STEM Extension at least 4 months before the end of my OPT (if applicable) OR when needing a H1B Cap Gap (if applicable).

Name of Student

Signature of Student

CWID

Date