

CERTIFICATION OF ACADEMIC DEPARTMENT OFFICIAL FOR OPTIONAL PRACTICAL TRAINING 600 Lincoln Avenue Charleston, IL 61920 Blair Hall, Room 1170 Phone: 217-581-2321 Email: <u>oiss@eiu.edu</u>

This form provides OISS with information when a student in F-1 student status is seeking a period of employment authorization for Optional Practical Training (OPT). Please complete this form and return it to the student. F-1 regulations permit a student to apply for OPT during one of the following times: while school is in session for up to 20 hours per week; during vacation periods, after completion of graduate course work but before deposit of thesis or dissertation; or after completion of studies.

Student Information:		
Family (Last) Name	First Name	Middle Name
Program (Major) of Study	EIU E-Number	SEVIS ID # (Upper Left Corner of I-20)
Email Address	US Phone Number	
Name of Academic Advisor/Graduate Coordinator:		
Phone:	Email:	
Please complete the appropriate section (A or B):		
<ul> <li>A. Complete this section if the student is applying for work permission to begin prior to completion of studies:         This student has completed all required course work for a graduate program, and is working on thesis: (Yes)</li></ul>		
Important: Students may not work on campus after the date of completion of studies noted on the practical training application form. Those with assistantships may use the final day of their appointment as a completion date for studies.		
I certify the above information to be tr	rue and correct.	
Academic Advisor/Graduate Coordi	nator Signature	Date: Month/Day/Year
OPT Start Date:		
By signing this document I am confirming that I agree to comply with all immigration regulations.		
		Date:

Student Signature

Month/Day/Year