

OPT: Optional Practical Training Request

updated: 11.12.2019

Name:		SEVIS ID:	
Non-UWG Email Address: _			
Expected UWG Graduation Date: (MM/DD/YYYY) _			_ UWG ID : 917
equest the following OPT debmitted to USCIS.	ates and understand	these dates (cannot be changed once
Requested OPT Start	Month:	Day:	Year:
Date: OPT End:	Month:	Day:	Year:
Please describe the nature o	f work you will be do	ing:	
Please list any previously au	thorized dates of OP	Г:	
Acknowledgment of "OPT –	My Responsibilities"		
I have received a copy of the information on that document	· · · · · · · · · · · · · · · · · · ·	• .	
Student Signature:		Date:	

Part II: Recommendation to be completed by the Student's Academic Advisor

Federal regulations for F1 international students requires application for "Optional Practical Training" to be approved in order for an F1 student to work off campus related to his / her field of study. The process requires recommendation by both the academic department and ISAP to submit the federal application.

Please complete Part II of this form and return the completed form to the student. Any questions can be directed to International Student Admissions & Program (ISAP) Thank you for your assistance.

Name of Academic Advisor:	Department:			
Degree Level of Student:	Major / Field of Study:			
When will this student complete h	nis or her studies at UWG? (MM/DD/YYYY):			
This date represents (Please check one):				
	Other (please explain):			
To the best of your knowledge, is study and appropriate to the stud	the proposed employment related to the student's field of lent's educational level?			
(Please select one):	[]YES []NO			
Academic Advisor Signature:				
Date:	UWG Tel:_Extension:			

Complete this form and return to:

University of West Georgia • International Student Admissions & Programs • Mandeville • Phone:678-839-4780 • Fax:678-839-5509