



Optional Practical Training (OPT) Application Form

Last Name _____ First Name _____ Date _____

Student ID _____ Major _____ Degree _____

Expected Graduation Date _____

Advisor: please verify the student's graduation date. Advisor Signature

Current Address _____
Number and Street Apt.#

_____ City State Zip Code

Email _____ Phone _____

OPT Application Checklist

- Passport (valid until _____)
- I-765 Form
- Copy of most recently stamped I-20
- Copy of I-94 (front and back)
- Copy of ID page of passport
- 2 US passport style photos
- Application fee (\$380 payable to US Department of Homeland Security)
- Copy of previous EAD if applicable

Type of OPT

- Pre-completion
- Post-completion

Requested OPT Start/End Date

Start Date _____
Month Date Year

End Date _____
Month Date Year

First Term at NDNU _____
Semester Year

I understand that as long as I am in F1 status I am responsible for notifying the DSO at NDNU of any change in my employer, name, or address within 10 days.

_____ (Student Signature)

DSO Note: _____ Student Eligible SEVIS/I-20 updated on _____