



## F-1 Optional Practical Training (OPT) Department Form

### Section 1: To Be Completed By the F-1 Student

Student Name: \_\_\_\_\_ SAGE ID: \_\_\_\_\_ SEVIS ID: \_\_\_\_\_

Specific dates of employment requested: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ (For a full year of OPT, the end date will be one day before the start date in the following year. For example, if your start date is 6/20/16, your end date for a full year of OPT will be 6/19/17.

Please select one: Part Time  or Full Time

I authorize the ISSO to share my program completion date with Brandeis department administrators if needed.

\_\_\_\_\_  
Student Signature Name (please print) Date

### Section 2: To Be Completed by the Academic Advisor (Undergraduates need a signature from Academic Services)

The above named student is seeking permission from the ISSO to request Optional Practical Training (OPT), employment authorization from the United States Citizenship and Immigration Service (USCIS), which allows F-1 visa students to work in their major field(s) of study.

Completion Dates: This date typically is the date of expected graduation. The completion date takes into consideration the defense date and the thesis / dissertation deadlines set forth in the Brandeis Bulletin. *After the student officially graduates/completes, they are no longer eligible to work at on-campus Brandeis without OPT employment authorization from USCIS.*

**PRE-COMPLETION Continuing Students:** The above named student is a full-time student in the Department of \_\_\_\_\_ expecting to complete a \_\_\_\_\_ (B.A., B.S., M.A., M.S., Ph.D.) degree by \_\_\_\_\_ (expected date of completion). The practical training employment related to his/her program of study is part-time (20 hours/week or less) during the academic year OR either part-time or full-time during the Brandeis University vacation period.

**PRE-COMPLETION FULL-TIME OPT for Master/PhD Students:** Continuing students who have completed all course work and would like to pursue full-time OPT while completing their dissertation. Must be ABD.

The above named student is a full-time student in the Department of \_\_\_\_\_ expecting to complete degree by \_\_\_\_\_.

*NOTE: GSAS students must have the signatures of both their faculty advisor and department chair.*

**POST-COMPLETION Graduating Students:** The above named student will complete all program requirements for the \_\_\_\_\_ (B.A., B.S., M.A., M.S., Ph.D.) degree on \_\_\_\_\_ (completion date).

**POST-COMPLETION Thesis/Dissertation or equivalent required for degree:** Continuing students who have completed all course work and would like to pursue full-time OPT while completing their dissertation. Must be ABD.

The above named student will complete **all required courses** for the \_\_\_\_\_ (M.A., M.S., Ph.D.) degree on \_\_\_\_\_ (completion date). Student is submitting a thesis/dissertation or equivalent to complete degree requirements. Expected date of Thesis Completion: \_\_\_\_\_.

*NOTE: GSAS graduate students must have the signature of their faculty member in their department.*

\_\_\_\_\_  
Advisor's signature Advisor's name and title (please print) Date

**NOTE OF CAUTION: Working without authorization is violating your status and may result in your loss of eligibility for benefits.**