



Optional Practical Training (OPT) Reporting Form

Student Name: _____ SC ID: _____

Email: _____ Phone #: _____

I verify that all information I have reported on this form is current and accurate.
I am aware that this information will be reported on my SEVIS record to the Department of Homeland Security.

Signature _____ Date: _____
mm/dd/yyyy

Instructions

For more information regarding OPT reporting requirements please refer to your copy of the *OPT Reporting Acknowledgement Form* which was submitted to the international office when you handed the *OPT Packet* in. If you have misplaced it, you may request a new copy. It is your responsibility to report any required information to an international advisor at Schoolcraft College in a timely manner.

Report your OPT, using this form **within the first 10 days of the start date indicated on your EAD card even if you are not currently employed.** This information will be used to notify the Department of Homeland Security of your current address and employment status. You must report any changes with your address and/or employment status within 10 days of the change. Keep all documentation from employers, and all I-20's issued to you, for your records. We do not automatically issue a new I-20 each time you report a change. If you would like a copy of the newly issued I-20 with the reflected changes, you must notify us.

Please select your reporting category (check all that apply):

- I am reporting my initial OPT (complete sections A,B,C)
- I am reporting a change of address (complete section A)
- I am reporting a change in employer or interruption of employment (complete section B)
- I am abandoning OPT and leaving the United States (complete section D)

Section A Report Address

U.S. Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Section B Employment Information

Please answer the following questions:

- Are you reporting a period of unemployment? ___Yes ___No
 If yes, please list the start date and end date (if applicable) of unemployment: _____
- Are you self-employed? ___ Yes ___No
- Are you adding new employment? ___ Yes ___No
- Do you have more than one employer? ___ Yes ___No
- Is this employment replacing a previous employment you reported? ___Yes ___No
 If yes, which employment is it replacing? _____
- If yes, when was the last day of work at your previous employer? _____

Employer Information

Employer's Name: _____		
Employer's Address: _____		
<i>Street Address</i>		<i>Apartment/Unit #</i>
_____	_____	_____
<i>City</i>	<i>State</i>	<i>Zip Code</i>
Employer's EIN (<i>ask human resources for this number</i>) _____		
Job Title: _____		Department: _____
Employment Start Date: _____		End Date: _____
<i>mm/dd/yyyy</i>		<i>mm/dd/yyyy</i>

Supervisor's Information

Supervisor's Name: _____	Job Title: _____
Email Address: _____	Phone #: _____

Verification Questions and Documents

You must submit the following documents along with this form:

- Employment Offer Letter
- Official Description of Job (job roles, duties, responsibilities)

Initial next to these statements if they are true:

I verify that I am employed full time (defined as an average of over 20 hours per week)

Pursuant to 8 CFR 274a. 12, I verify that the employment reported above is related to my current or previous major and awarded degree from Schoolcraft College.

Section C Initial Report Documentation

Please attach a copy of the front and back of your EAD card to this form.

EAD start date: _____
mm/dd/yyyy

EAD end date: _____
mm/dd/yyyy

Section D Abandoning OPT

IMPORTANT

Only complete this section if you plan on leaving the United States and want to abandon your OPT and F-1 status.

I am abandoning my Optional Practical Training (OPT) and exiting the United States. I do not plan to reenter and utilize my OPT benefits. I plan to exit the United States on _____.
mm/dd/yyyy

Signature

Today's Date: *mm/dd/yyyy*