

## Christian Brothers University

## Optional Practical Training Request Form

- If you are graduating and plan on applying for Optional Practical Training, please complete this form and submit it with your OPT application packet.
- USCIS must receive your complete OPT application within 30 days of the new OPT I-20 being issued.

Family Name	First Name					
CBU ID	SEVIS ID					
Have you been authori	zed for OPT in the past?	No	Yes	from:	to	
If you have been autho	orized for OPT in the pas	<b>t</b> , on wh	ich degree	level was it ba	sed?	
	Bachelor's	Master	s			
When do you expect to	o graduate from Christiar	n Brother	s Universit	y?		
Fall Semester	Spring Semester	_Summe	r (August) <sub>-</sub>		Year	
Requested OPT Author	ization Date					
*Start date must be wi	thin 60 days of your prog	gram end	date.			
•	nsibilities required for m I in the OPT application.	aintainin	g F-1 statu	s during my pe	eriod of OPT	
Student's Signature:						
Term/Year. Upon succ	verifies that the above stu essful completion of his/	her curr	ent course	work, he/she v		
Associate Registrar Signature:			Date:			

Please return form to a DSO at DSO@cbu.edu