

Optional Practical Training (OPT) TUTORIAL

International Student Office

29 E Madison St,

Lower Level,

Chicago, IL 60602

(312) 658-5114

<http://www.tbiil.edu/opt>

Optional Practical Training (OPT) TUTORIAL

Please note that this tutorial is for instructional purposes only.

An OPT application to USCIS is your own personal application. You alone are responsible for timely filing with full documentation, understanding F-1 rules regarding OPT, and properly maintaining F-1 status.

Please review the entire tutorial and ask your DSO if you have questions.

OPT Tutorial Outline

- What is OPT, OPT Eligibility Requirements, Application Process Overview
- Completing TBI's OPT I-20 Request Process
- Choosing a Start Date & Scenarios
- Checking your OPT I-20 for Accuracy
- Preparing your OPT Request to USCIS
 - Your G-1145 Form
 - The I-765
 - Your Photos
 - Paying the USCIS Fee
 - Completing the I-765 Form
 - Your OPT I-20 Copy
 - Your Passport & Visa copies
 - Your I-94 Record
 - Your Previous I-20 Copies
 - Your Previous EAD Card Copy
- Top 3 USCIS OPT Denial Reasons
- Mailing your Application & Application Deadlines
- Receiving your I-797c receipt notice
- Tracking your USCIS case status
- Requests for Evidence and Rejections/Denials
- Receiving your EAD Card
- Maintaining Your F-1 Status, Reporting and Employment Requirements
- Travel Requirements
- Completing OPT & Grace Period

What is OPT?

Optional Practical Training is an F-1 student employment benefit that allows for off campus work authorization in a student's major field of study.

Students must be in full-time F-1 status for at least one academic year.*

* Some students who change visa status to F-1 and who have been continuously enrolled in a full-time degree program for at least 1 academic year may qualify for OPT prior to 1 year in F-1 status.

Are you eligible for OPT?

Pre-Completion OPT

For most students, Curricular Practical Training (CPT) is a better option. It allows for off-campus work authorization in your field of study without using any of the 12 months of OPT time. For a detailed description of Curricular Practical Training, please contact the International Student Advisor.

You do NOT need to have a job offer to apply for OPT. The authorization is based on your program completion, not a specific employer. See [the OPT FAQ](#) webpage for more commonly asked questions.

Post-Completion OPT

Have you been continuously in a valid student status for one academic year?

At TBI, one academic year means full-time enrollment (minimum 12 credits) for consecutive three quarters:

Will you be completing your program of study at TBU in the next 90 days?

The application for OPT cannot be submitted more than 90 days before your program completion date.

Are you eligible for OPT?

CPT Usage

- If you have used 1 year or more of full-time Curricular Practical Training (CPT), during your current degree level, then you do not qualify for OPT.
- Part-time CPT does not count towards OPT disqualification.
- Note that heavy CPT usage either part-time or full-time can cause your OPT application to be subject to additional scrutiny. Be prepared to provide evidence of all prior CPT I-20s, as well as the academic work related to your CPT.

Types of Qualifying Employment

During your 12 month OPT period, OPT employment must be a minimum of 20 hours per week in a job that is directly related to your degree program. The burden of proof is on the student to demonstrate the relationship. The types of employment allowed during the initial 12-month period of OPT include:

- Paid employment
- Multiple employers
- Work for hire (commonly referred to as 1099
- Self-employed business owner
- Employment through an agency
- Unpaid / Volunteer employment

Employment must be **DIRECTLY RELATED** to your Major field of study.

See [the OPT Qualifying Employment webpage](#) for a detailed explanation of each category.

Application Process Overview

1. Request an OPT I-20

The I-20 will be ready for pickup 3 business days after submitting the OPT request form and Post-Completion Services Fee payment to TBI International Student Office.

2. Prepare and mail your application materials-APPLY EARLY!

Allow approximately 1 week to gather and organize the required documents. *After USCIS has received your application, allow approximately 3-5 months for processing. (The observed average processing is 90-120 days, but processing can take longer in some cases.) See current USCIS processing times for Form "I-765" for "Potomac Service Center" here: <https://egov.uscis.gov/processing-times/>*

3. Receive the Employment Authorization Document (EAD)

Can I do anything about the long USCIS processing time?

There is nothing you can do about the USCIS processing time, other than to apply as early as possible and be honest with your employer about your possible start date! See [USCIS Issues & Tracking](#) for how to report a case processing longer than the current USCIS processing time.


Step 1: Request your OPT I-20

Step 1: Request your OPT I-20

Complete the [OPT Request Form \[pdf\]](#):

- Confirm your expected program completion date.
- On Campus Employment-All current on-campus employment authorization MUST END on or before your Program Completion Date. You can only begin work again, directly related to your field of study, *after* your OPT EAD approved start date.
- Get the required signature from your academic advisor.
- Choose your OPT start date.
- Pay/prepare your \$100 Post-Completion Services Fee to TBI via credit/debit card, check, or money order (no cash). Attach proof of payment to OPT Request form.
- **Credit/Debit Card: Pay online.** Call the International Student Office at (312) 658-5114 to pay. You must print your receipt/proof of payment and attach it to your OPT I-20 Request form.
- **Check or Money Order:** Make check or money order payable to order of "Taylor Business Institute" and write your Student ID Number in the notes/memo section; attach your check or money order to the OPT I-20 Request form.

OPT Requests without proof of payment will not be accepted



TBI
Taylor Business Institute
est. 1962

Optional Practical (OPT) Training Request Form

To request an OPT I-20, you must submit to TBI International Office:

- This form completed and signed by you and your Academic Advisor (original signature required).
- \$100 Post-Completion Services Fee. Attach payment receipt. **Request form will not be accepted without proof of payment.**

Your new OPT I-20 will be ready for pick up 3 business days after submitting this form.
USCIS must receive your complete OPT application within 30 days of the new OPT I-20 being issued.


Family Name: <input type="text"/>		Given Name: <input type="text"/>	
TBI Student or SEVIS ID: <input type="text"/>		I-20 Program End Date: <input type="text"/>	
Email address you will use after graduation: <input type="text"/>			Telephone: <input type="text"/>
Have you been authorized for OPT in the past? <input type="checkbox"/> No <input type="checkbox"/> Yes - From: <input type="text"/> To: <input type="text"/>			
If you have been authorized for OPT in the past, on which degree level was it based? <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Ph.D.			
When do you expect to graduate? Quarter: <input type="text"/> Date: <input type="text"/>		Are you currently employed on campus? <input type="checkbox"/> No <input type="checkbox"/> Yes - Until: <input type="text"/>	
Requested OPT Authorization Dates: *Start Date: <input type="text"/> End Date: <input type="text"/> <small>*Start date must be within 60 days of your program completion date.</small>			
<input type="checkbox"/> I have fully read all slides in the OPT Tutorial: http://www.tbii.edu/opt-tutorial.pdf I understand OPT application procedures and the responsibilities required for maintaining F-1 status during my period of OPT authorization as stated in this form, in the OPT Tutorial and on the TBI OPT website: http://www.tbii.edu/opt I understand I am solely responsible for submitting a proper & timely OPT application and for maintaining my F-1 student status during OPT.			
Student Signature Here:		Date:	
Academic Recommendation This section must be completed by the Dean.	Student's Major: <input type="checkbox"/> Accounting Technician <input type="checkbox"/> Criminal Justice and Security Administration <input type="checkbox"/> Electronics Engineering Technology <input type="checkbox"/> Medical Billing and Coding Specialist		
	Is student registered in current term? <input type="checkbox"/> Yes <input type="checkbox"/> No		Level of Study: <input type="checkbox"/> Associate Degree
	When is student expected to complete all degree requirements? Quarter: <input type="text"/> Date: <input type="text"/>		Will the student have completed all coursework/ requirements for the degree by the start date of OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Has the student met the criteria for graduation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Has the student met the eligibility criteria for OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Minimum CGPA (2.0) requirements are met? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>"I confirm that the information provided in this section is true and correct. I would like to recommend that this student be allowed to obtain Optional Practical Training in order to secure a position in his/her field of study."</i>			
Optional Comments: <input type="text"/>			
Advisor's Name: <input type="text"/>			
Department: <input type="text"/>			
Signature: <input type="text"/>		Telephone: <input type="text"/>	
For TBI International Office use only Payment type: <input type="checkbox"/> Credit/Debit <input type="checkbox"/> Check/Money Order Payment receipt attached: <input type="checkbox"/> Confirmed by: <input type="text"/> Request reviewed and approved by: <input type="text"/> Date: <input type="text"/>			

OPT Request Form
04-01-2020
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Choose your OPT start & end date


- Your OPT start date is the date that your 12 months of work authorization begins.
- Your OPT start date must be within the 60-day grace period after the program completion date.
- The end date will usually be 1 year from your start date (*i.e. a July 2 start date will have a July 1 end date.*)
- **DON'T WAIT** until you get a job offer to apply for OPT or select your dates. Estimate when you would like to be available to work, and choose that start date. If you wait for an offer, you may not be able to apply for OPT in time.
- On Campus Employment- All current on-campus employment **MUST END** on or before your Program Completion Date. You can only begin work again, directly related to your field of study, *after* your OPT EAD approved start date.
- The requested start & end dates will be noted on page 2 of the new OPT I-20.

NOTE: Once USCIS receives the OPT application, it is not possible to change the requested start and end dates.

Optional Practical (OPT) Training Request Form		
<p>To request an OPT I-20, you must submit to TBI International Office:</p> <ul style="list-style-type: none"> • This form completed and signed by you and your Academic Advisor (original signature required). • \$100 Post-Completion Services Fee: Attach payment receipt. Request form will not be accepted without proof of payment. 		
<p><small>Your new OPT I-20 will be ready for pick up 3 business days after submitting this form. USCIS must receive your complete OPT application within 30 days of the new OPT I-20 being issued.</small></p>		
Family Name: <input type="text"/>	Given Name: <input type="text"/>	
TBI Student or SEVIS ID: <input type="text"/>	I-20 Program End Date: <input type="text"/>	
Email address you will use after graduation: <input type="text"/>		Telephone: <input type="text"/>
Have you been authorized for OPT in the past? <input type="checkbox"/> No <input type="checkbox"/> Yes - From <input type="text"/> To <input type="text"/>		
If you have been authorized for OPT in the past, on which degree level was it based? <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Ph.D.		
When do you expect to graduate? Quarter: <input type="text"/> Date: <input type="text"/>		Are you currently employed on campus? <input type="checkbox"/> No <input type="checkbox"/> Yes - Until <input type="text"/>
Requested OPT Authorization Dates: <input type="text"/>		<input type="text"/>
<p><small>*Start Date must be within 60 days of your program completion date.</small></p>		
<p><input type="checkbox"/> I have fully read all slides in the OPT Tutorial: http://www.tbii.edu/opt-tutorial.pdf</p> <p>I understand OPT application procedures and the responsibilities required for maintaining F-1 status during my period of OPT authorization as stated in this form, in the OPT Tutorial and on the TBI website: http://www.tbii.edu/opt</p> <p>I understand I am solely responsible for submitting a proper & timely OPT application and for maintaining my F-1 student status during OPT.</p>		
Student Signature Here:		Date:
Academic Recommendation	Student's Major: <input type="checkbox"/> Accounting Technician <input type="checkbox"/> Criminal Justice and Security Administration <input type="checkbox"/> Electronics Engineering Technology <input type="checkbox"/> Medical Billing and Coding Specialist	
	Is student registered in current term? <input type="checkbox"/> Yes <input type="checkbox"/> No Level of Study: <input type="checkbox"/> Associate Degree	
	When is student expected to complete all degree requirements? Quarter: <input type="text"/> Date: <input type="text"/> Will the student have completed all coursework requirements for the degree by the start date of OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Has the student met the criteria for graduation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Has the student met the eligibility criteria for OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No Minimum CGPA (2.0) requirements are met? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<p><small>*I confirm that the information provided in this section is true and correct. I would like to recommend that this student be allowed to obtain Optional Practical Training in order to secure a position in his/her field of study.</small></p> <p>Optional Comments: <input type="text"/></p>		
Advisor's Name: <input type="text"/>		
Department: <input type="text"/>		
Signature: <input type="text"/>		Telephone: <input type="text"/>
<p>For TBI International Office use only Payment type: <input type="checkbox"/> Credit/Debit <input type="checkbox"/> Check/Money Order Payment receipt attached: <input type="checkbox"/> Confirmed by: <input type="text"/></p> <p>Request reviewed and approved by: <input type="text"/> Date: <input type="text"/></p>		
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Obtain Academic Recommendation and signature

- Obtain the signature from the Academic Dean.
- Expected completion/graduation = The last day of the quarter in which program requirements are completed.



Optional Practical (OPT) Training Request Form

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- \$100 Post-Completion Services Fee: Attach payment receipt. **Request form will not be accepted without proof of payment.**

Your new OPT I-20 will be ready for pick up 3 business days after submitting this form. USCIS must receive your complete OPT application within 30 days of the new OPT I-20 being issued.

Family Name: <input type="text"/>		Given Name: <input type="text"/>	
TBI Student or SEVIS ID: <input type="text"/>		I-20 Program End Date: <input type="text"/>	
Email address you will use after graduation: <input type="text"/>		Telephone: <input type="text"/>	
Have you been authorized for OPT in the past? <input type="checkbox"/> No <input type="checkbox"/> Yes - From <input type="text"/> To <input type="text"/>			
If you have been authorized for OPT in the past, on which degree level was it based? <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Ph.D.			
When do you expect to graduate? Quarter: <input type="text"/> Date: <input type="text"/>		Are you currently employed on campus? <input type="checkbox"/> No <input type="checkbox"/> Yes - Until <input type="text"/>	
Requested OPT Authorization Dates: *Start Date: <input type="text"/> *End Date: <input type="text"/> <small>*Start date must be within 60 days of your program completion date.</small>			
<input type="checkbox"/> I have fully read all slides in the OPT Tutorial: http://www.tbii.edu/opt-tutorial.pdf I understand OPT application procedures and the responsibilities required for maintaining F-1 status during my period of OPT authorization as stated in this form, in the OPT Tutorial and on the TBI OPT website: http://www.tbii.edu/opt I understand I am solely responsible for submitting a proper & timely OPT application and for maintaining my F-1 student status during OPT.			
Student Signature Here:		Date:	
Academic Recommendation <small>This section must be completed by the Dean.</small>	Student's Major: <input type="checkbox"/> Accounting Technician <input type="checkbox"/> Criminal Justice and Security Administration <input type="checkbox"/> Electronics Engineering Technology <input type="checkbox"/> Medical Billing and Coding Specialist		
	Is student registered in current term? <input type="checkbox"/> Yes <input type="checkbox"/> No		Level of Study: <input type="checkbox"/> Associate Degree
	When is student expected to complete all degree requirements? Quarter: <input type="text"/> Date: <input type="text"/>		Will the student have completed all coursework requirements for the degree by the start date of OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Has the student met the criteria for graduation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Has the student met the eligibility criteria for OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Minimum CGPA (2.0) requirements are met? <input type="checkbox"/> Yes <input type="checkbox"/> No		
I confirm that the information provided in this section is true and correct. I would like to recommend that this student be allowed to obtain Optional Practical Training in order to secure a position in his/her field of study. Optional Comments: <input type="text"/> Advisor's Name: <input type="text"/> Department: <input type="text"/> Signature: <input type="text"/> Telephone: <input type="text"/>			
For TBI International Office use only Payment type: <input type="checkbox"/> Credit/Debit <input type="checkbox"/> Check/Money Order Payment receipt attached: <input type="checkbox"/> Confirmed by: _____ Request reviewed and approved by: _____ Date: _____			


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Program completion

To qualify for a OPT, students must:

- Have a final course requirement to be completed by the program completion date.
- Be enrolled full time during or receive Reduced Course Load approval from the International Student Office for final term.
- Use the end date of your final term as your program completion date.

Note: If enrolled in your final semester, any on-campus employment or Curricular Practical Training is limited to 20 hours per week.

Optional Practical (OPT) Training Request Form			
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<p><small>Your new OPT I-20 will be ready for pick up 3 business days after submitting this form. USCS must receive your complete OPT application within 30 days of the new OPT I-20 being issued.</small></p>			
Family Name: <input type="text"/>	Given Name: <input type="text"/>		
TBI Student or SEVIS ID: <input type="text"/>	I-20 Program End Date: <input type="text"/>		
Email address you will use after graduation: <input type="text"/>		Telephone: <input type="text"/>	
Have you been authorized for OPT in the past? <input type="checkbox"/> No <input type="checkbox"/> Yes - From <input type="text"/> To <input type="text"/>			
If you have been authorized for OPT in the past, on which degree level was it based? <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Ph.D.			
When do you expect to graduate? Quarter: <input type="text"/> Date: <input type="text"/>		Are you currently employed on campus? <input type="checkbox"/> No <input type="checkbox"/> Yes - Until <input type="text"/>	
Requested OPT Authorization Dates: *Start Date: <input type="text"/> End Date: <input type="text"/> <small>*Start date must be within 60 days of your program completion date.</small>			
<p><input type="checkbox"/> I have fully read all slides in the OPT Tutorial: http://www.tbii.edu/opt-tutorial.pdf</p> <p>I understand OPT application procedures and the responsibilities required for maintaining F-1 status during my period of OPT authorization as stated in this form, in the OPT Tutorial and on the TBI OPT website: http://www.tbii.edu/opt</p> <p>I understand I am solely responsible for submitting a proper & timely OPT application and for maintaining my F-1 student status during OPT.</p>			
Student Signature Here:		Date:	
Academic Recommendation This section must be completed by the Dean.	Student's Major: <input type="checkbox"/> Accounting Technician <input type="checkbox"/> Criminal Justice and Security Administration <input type="checkbox"/> Electronics Engineering Technology <input type="checkbox"/> Medical Billing and Coding Specialist		
	Is student registered in current term? <input type="checkbox"/> Yes <input type="checkbox"/> No Level of Study: <input type="checkbox"/> Associate Degree		
	When is student expected to complete all degree requirements? Quarter: <input type="text"/> Date: <input type="text"/> Will the student have completed all coursework requirements for the degree by the start date of OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Has the student met the criteria for graduation? <input type="checkbox"/> Yes <input type="checkbox"/> No Has the student met the eligibility criteria for OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No Minimum CGPA (2.0) requirements are met? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	*I confirm that the information provided in this section is true and correct. I would like to recommend that this student be allowed to obtain Optional Practical Training in order to secure a position in his/her field of study."		
Optional Comments: <input type="text"/>			
Advisor's Name: <input type="text"/>			
Department: <input type="text"/>			
Signature: <input type="text"/>			Telephone: <input type="text"/>
For TBI International Office use only Payment type: <input type="checkbox"/> Credit/Debit <input type="checkbox"/> Check/Money Order Payment receipt attached: <input type="checkbox"/> Confirmed by: <input type="text"/> Request reviewed and approved by: <input type="text"/> Date: <input type="text"/>			
OPT Request Form		04-01-2020	
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Program Completion & Employment

- Your I-20 will be shortened to reflect your Program Completion date.
- ALL CURRENT EMPLOYMENT must STOP on or before your Program Completion date- this includes on or off-campus employment.
- After your program Completion Date, you may only work during the dates listed on your approved OPT EAD card. Working before or after the EAD card dates is a serious violation of F-1 status.
- Think carefully about your employment needs when choosing your OPT start date.

Check your OPT I-20 for accuracy

After receiving your OPT I-20, notify the DSO immediately if there are any errors.

Education Level

Program End Date—Program completion date will be updated to the program completion date on the OPT request form. *(I-20 will remain valid through OPT authorization period on page 2 or the approved EAD card dates)*

Remember: All current on or off-campus employment authorization **MUST END** on or before your Program End Date. You can only begin work again, directly related to your field of study, *after* your OPT EAD approved start date.

School Attestation—Make sure there is a DSO signature. Check the DATE ISSUED—USCIS must receive your application within 30 days of this date.

Student Attestation—You should sign & date I-20. Students 18 and over do not need a parent’s signature.

Department of Homeland Security U.S. Immigration and Customs Enforcement		I-20, Certificate of Eligibility for Nonimmigrant Student Status OMB NO. 1653-0038	
SEVIS ID:			
SURNAME/PRIMARY NAME	GIVEN NAME	Class of Admission	
PREFERRED NAME	PASSPORT NAME	F-1	
COUNTRY OF BIRTH	COUNTRY OF CITIZENSHIP	ACADEMIC AND LANGUAGE	
DATE OF BIRTH	ADMISSION NUMBER		
FORM ISSUE REASON CONTINUED ATTENDANCE	LEGACY NAME		
SCHOOL INFORMATION			
SCHOOL NAME University of California at Berkeley University of California at Berkeley	SCHOOL ADDRESS Berkeley International Office, 2299 Piedmont, Berkeley, CA 94720		
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL International Student Advisor	SCHOOL CODE AND APPROVAL DATE SFR214F00615000 27 JANUARY 2009		
PROGRAM OF STUDY			
EDUCATION LEVEL BACHELOR'S	MAJOR 1 Chemistry, General 40.0501	MAJOR 2 None 00.0000	
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE	
START OF CLASSES 31 AUGUST 2015	PROGRAM START/END DATE 31 AUGUST 2015 - 15 DECEMBER 2017		
FINANCIALS			
ESTIMATED AVERAGE COSTS FOR: 12 MONTHS		STUDENT'S FUNDING FOR: 12 MONTHS	
Tuition and Fees	\$ 21,401	Personal Funds	\$ 0
Living Expenses	\$ 9,450	Funds From This School	
Expenses of Dependents (0)	\$	Family Support	\$ 30,851
Other	\$	On-Campus Employment	\$
TOTAL	\$ 30,851	TOTAL	\$ 30,851
REMARKS			
SCHOOL ATTESTATION			
I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.			
SIGNATURE OF:	<i>DSO Signature</i>	DATE ISSUED 07 December 2017	PLACE ISSUED Berkeley, CA
STUDENT ATTESTATION			
I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.			
SIGNATURE OF:	<i>Student Signature</i>	DATE	
NAME OF PARENT OR GUARDIAN	X SIGNATURE	ADDRESS (city/state or province/country)	DATE



Check your OPT I-20 for accuracy

OPT start and end dates requested (OPT start date may be adjusted in SEVIS if USCIS does not complete the processing of your OPT by the requested date. Apply as early as possible.

You will receive a new travel signature at the time you request your OPT I-20. Please note: USCIS must receive your application within 30 days of the DATE ISSUED date on PAGE 1, not the travel signature date. (The travel signature may be a later date.)

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N00123456789 (F-1) NAME: Wenyi Wang

EMPLOYMENT AUTHORIZATIONS

TYPE	FULL/PART-TIME	STATUS	START DATE	END DATE
POST-COMPLETION OPT	FULL TIME	REQUESTED	15 JUNE 2017	14 JUNE 2018

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE
17 JANUARY 2017	12 MAY 2017

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		

ICE Form I-20 (3/31/2018) Page 2 of 3



Step 2: Prepare & Mail Your Application Materials

Required Documents for OPT Application

All documents should be printed or copied single-sided

- 2 U.S. Passport Photos (with name and I-94 number written lightly in pencil on back of each), taken within the past 30 days.
- USCIS Fee of **\$410**. Check, Money Order, or Credit Card payment made payable to: “U.S. Department of Homeland Security.” Write your SEVIS ID in the memo line.
- Form G-1145 to confirm receipt and obtain case number in advance of paper notification: <http://www.uscis.gov/files/form/g-1145.pdf>
- Original form I-765: <http://www.uscis.gov>
- Copy of OPT I-20 (pages 1-3) issued by ISO within the past 30 days. Don't forget to sign it!
- Copy of currently valid passport biographical page and F-1 visa stamp, if applicable.
- Copy of expired passport biographical page if you used that document to enter the U.S. most recently.
- Printout of electronic I-94 record (<https://i94.cbp.dhs.gov/i94/>) or copy of paper Form I-94 (both sides).
- Copies of all previous CPT I-20s (*from TBI and/or previous schools*), if applicable.
- Copies of all previous OPT I-20s and EAD card(s) (*from TBI and/or previous schools*), if applicable.
- SPECIAL CASES (RARE): If your TBI OPT I-20 shows *less than 1 academic year* (2 semesters) of enrollment
 - Readmitted/Transfer students** –1) Copies of I-20s from previous Transfer schools *and* 2) DSO Transfer I-20 Letter
 - Change of Status students** –1) Copy of Change of Status Approval Notice *and* 2) Official TBI transcript and 3) DSO Change of Status letter

No documents are required for F-2 dependents.

Gather the Required Documentation

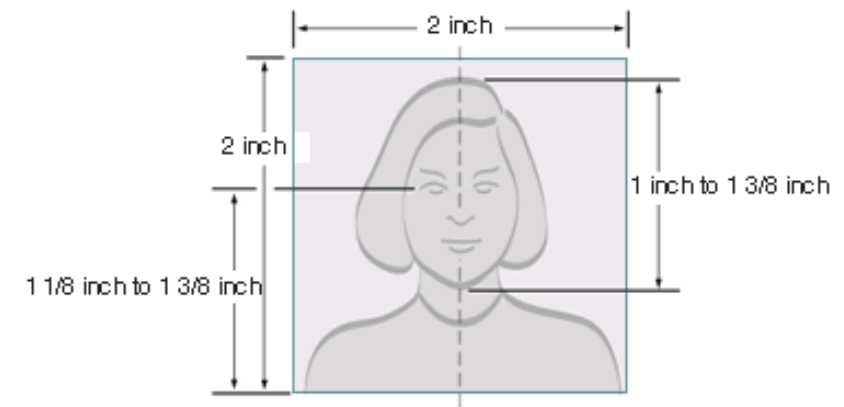
Passport Photo Requirements

The photos required to use for the OPT application must meet the specifications of U.S. style passport photos. To see a full description of these specifications, go to the U.S. Department of State website.

- Submit 2 identical color passport photos taken within 30 days of filing your application. The photos must have a white to off-white background, be printed on thin paper with a glossy finish, and be unmounted and unretouched. The passport-style photos must be 2" by 2". You must remove your glasses and your head must be bare unless you are wearing headwear as required by a religious order of which you are a member.
- Using pencil or felt tip (soft) pen, lightly print your name and I-94 number on the back of the photo. Do not damage the photo surface by pressing hard while writing.

Professional Photography

USCIS has been examining passport photos more strictly. TBI recommends students have their photos taken professionally. Recently, students have been visiting the following locations to obtain their photos.



Gather the Required Documentation

Check, Money Order, or Credit Card:

- **USCIS Payment Methods:** Check/Money Order or Credit Card Payment for \$410.
- **Check/Money Order** should be made payable to "U.S. Department of Homeland Security" with SEVIS number in the memo line. Money orders can be purchased at banks, post office, and some local grocery stores. Make sure a name and address are printed on the check. If the address has changed, that is fine.
- Do not use “temporary checks” often issued by the bank when opening a new account. These checks have no name or address in the upper left hand corner.
- **For Credit Card** payment, submit form [G-1450](#), authorized payment amount \$410. You may only use a credit card account with a U.S. billing address—no foreign billing address is allowed. You can use cards with Visa, MasterCard, American Express, and Discover.
- MOST OPT DENIALS ARE DUE TO BAD PAYMENTS! IF YOU USE A CHECK OR CREDIT CARD MAKE SURE YOU MAINTAIN SUFFICIENT FUNDS IN THE ACCOUNT.

Your Name Here
Your Street Address Here
Your City, State, Zip Code, Here
Your telephone number Here

1936
MM/DD/YYYY
DATE

PAY TO THE ORDER OF **U.S. Department of Homeland Security** | \$ **410.00**

Four-hundred and ten dollars 00/100 DOLLARS

FOR Your SEVIS ID Number *Your Signature Here*

⑆000000186⑆ 000000529* 1.000

UNITED STATES POSTAL SERVICE® POSTAL MONEY ORDER

Serial Number Year, Month, Day Post Office U.S. Dollars and Cents

000000000000 This section will be completed by issuer of money order.

Amount

Pay to **U.S. Department of Homeland Security** Clerk

Address **USCIS Mailing Address** From **Your name**

Address **Your mailing address**

Memo **OPT Application: Your SEVIS ID number**

⑆000000000⑆ SEE REVERSE WARNING • NEGOTIABLE ONLY IN THE U.S. AND POSSESSIONS

Money orders and cashier checks should include the same information as a personal check.

Gather the Required Documentation

Form G-1145

- Attach to the top of the OPT Application Packet
- Use this form to request text and email notification(s) regarding your application. Download the form at <http://www.uscis.gov/files/form/g-1145.pdf>

WARNING!

USCIS will rarely contact you by phone regarding the status of your OPT application.

If you receive a phone call from a person claiming to work for USCIS or any other government agency, do not provide your personal information to them. Note the person's name, phone number, and email address, and contact the DSO before responding.

e-Notification of Application/Petition Acceptance
 Department of Homeland Security
 U.S. Citizenship and Immigration Services

USCIS
 Form G-1145
 OMB No. 1615-0109
 Expires 09/30/2014

What Is the Purpose of This Form?

Use this form to request an electronic notification (e-Notification) when U.S. Citizenship and Immigration Services accepts your immigration application. This service is available for applications filed at a USCIS Lockbox facility.

General Information

Complete the information below and clip this form to the first page of your application package. You will receive one e-mail and/or text message for each form you are filing.

We will send the e-Notification within 24 hours after we accept your application. Domestic customers will receive an e-mail and/or text message; overseas customers will only receive an e-mail. Undeliverable e-Notifications cannot be resent.

The e-mail or text message will display your receipt number and tell you how to get updated case status information. It will not include any personal information. The e-Notification does not grant any type of status or benefit; rather it is provided as a convenience to customers.

USCIS will also mail you a receipt notice (I-797C), which you will receive within 10 days after your application has been accepted; use this notice as proof of your pending application or petition.

USCIS Privacy Act Statement

AUTHORITIES: The information requested on this form, and the associated evidence, is collected under the Immigration and Nationality Act, section 101, et seq.

PURPOSE: The primary purpose for providing the requested information on this form is to determine if you have established eligibility for the immigration benefit for which you are filing. The information you provide will be used to grant or deny the benefit sought.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision or result in denial of your form.

ROUTINE USES: The information you provide on this form may be shared with other Federal, State, local, and foreign government agencies and authorized organizations following approved routine uses described in the associated published system of records notices (DHS-USCIS-007 - Benefits Information System and DHS-USCIS-001 - Alien File, Index, and National File Tracking System of Records, which can be found at www.dhs.gov/privacy). The information may also be made available, as appropriate, for law enforcement purposes or in the interest of national security.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue, NW, Washington, DC 20529-2140. OMB No. 1615-0109. **Do not mail your completed Form G-1145 to this address.**

Complete this form and clip it on top of the first page of your immigration form(s).

Applicant/Petitioner Full Last Name	Applicant/Petitioner Full First Name	Applicant/Petitioner Full Middle Name
E-mail Address	Mobile Phone Number (Text Message)	

Form G-1145 02/28/13 Page 1 of 1

Gather the Required Documentation

Form I-765

Download the I-765 form from the USCIS web site and review the I-765 instructions found there. **Important:** Use the most current version. It is best to download it just before mailing the application since USCIS updates it frequently.

How to fill out Form I-765

- Type or print legibly in in black ink.
- Answer all questions fully and accurately.
- If a question does not apply to you, type or print “N/A”
- Print and complete ALL pages 1-7. If any pages are missing, your application will be rejected!
- Print all pages single-sided

Application For Employment Authorization
 USCIS Form I-765
 Department of Homeland Security
 U.S. Citizenship and Immigration Services
 OMB No. 1615-0040
 Expires 05/31/2020

Part 1. Reason for Applying
 I am applying for (select only one box):
 I.a. Initial permission to accept employment.
 I.b. Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document NOT DUE to U.S. Citizenship and Immigration Services (USCIS) error.
 NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to Replacement for Card Error in the What is the Filing Fee section of the Form I-765 Instructions for further details.
 I.c. Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

Part 2. Information About You
 Your Full Legal Name

Part 2. Information About You (continued)

Your U.S. Mailing Address
 5.a. In Care Of Name (if any)
 5.b. Street Number and Name
 5.c. Apt. Ste. Flr.
 5.d. City or Town
 5.e. State ZIP Code
 (USPS ZIP Code Lookup)

U.S. Physical Address
 7.a. Street Number and Name
 7.b. Apt. Ste. Flr.
 7.c. City or Town
 7.d. State 7.e. ZIP Code

Other Information
 8. Alien Registration Number (A-Number) (if any)
 9. USCIS Online Account Number (if any)
 10. Gender Male Female
 11. Marital Status Single Married Divorced Widowed
 12. Have you previously filed Form I-765? Yes No
 13.a. Has the Social Security Administration (SSA) ever



Some parts of the I-765 can be confusing. The following slides will help you complete those “tricky” questions. Contact DSO with ANY questions or uncertainties about completing the I-765.

Complete the Form I-765

Top Portion: leave this entire section blank

For USCIS Use Only	<input type="checkbox"/> Authorization/Extension Valid From	Fee Stamp	Action Block
	<input type="checkbox"/> Authorization/Extension Valid Through		
	Alien Registration Number A-	<i>Leave blank</i>	
	Remarks		
To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).		<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney or Accredited Representative USCIS Online Account Number (if any)

PART 1. Reason for Applying, pg. 1

Check the “1.a.” box for “Initial Permission to accept employment.”

▶ **START HERE - Type or print in black ink.**

Part 1. Reason for Applying

I am applying for (select only one box):

- 1.a. Initial permission to accept employment.
- 1.b. Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document **NOT DUE** to U.S. Citizenship and Immigration Services (USCIS) error.

NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to **Replacement for Card Error** in the **What is the Filing Fee** section of the Form I-765 Instructions for further details.

- 1.c. Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

Complete the Form I-765

PART 2. Information About You, pg. 1

#1.a.-1.c. Name

Your entire family name should be in CAPITAL letters. Use upper and lower case for the first name. Please write your name **exactly as it appears in the Surname/Family Name and Given Name fields on your I-20**. Note your I-20 DOES NOT use the Middle Name field!

Department of Homeland Security U.S. Immigration and Customs Enforcement SEVIS ID: N0004705512	I-20, Certificate of Eligibility for Nonimmigrant Student Status OMB NO. 1653-0038	
SURNAME/PRIMARY NAME Doe Smith	GIVEN NAME John	CLASS F-1
PREFERRED NAME John Doe-Smith	PASSPORT NAME	
COUNTRY OF BIRTH UNITED KINGDOM	COUNTRY OF CITIZENSHIP UNITED KINGDOM	

#2.a.-4.c. Other Names Used

Enter your previous names, including nicknames you have used in official records or documentation. If your I-20 *Preferred Name* is different than the names you wrote for #1, include that here. If none, write "N/A"

Part 2. Information About You	
Your Full Legal Name	
1.a. Family Name (Last Name)	FAMILY NAME
1.b. Given Name (First Name)	First Name
1.c. Middle Name	N/A
Other Names Used	
Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 6.	
Additional Information.	
2.a. Family Name (Last Name)	N/A
2.b. Given Name (First Name)	N/A
2.c. Middle Name	N/A
3.a. Family Name (Last Name)	N/A
3.b. Given Name (First Name)	N/A
3.c. Middle Name	N/A
4.a. Family Name (Last Name)	N/A
4.b. Given Name (First Name)	N/A
4.c. Middle Name	N/A



If you are typing out the I-765 electronically, be aware that the form does not allow you to write the "/" character into these fields. You will need to hand-write the "N/A" wherever this appears in the instructions.

Complete the Form I-765

PART 2. Information About You, pg. 2

U.S. Mailing Address

This is where you would like the Receipt Notice and the EAD card to be mailed.

This is very important!

The address should be valid for at least 3-5 months, the length of time it will take to process the application. If you have plans to move during this time, use a reliable friend or family member's address to receive the EAD (indicate this in #5.a.) It is also possible to use a P.O. Box for mailing addresses.

#5.a. If the mailing address belongs to someone other than yourself, put their full name (First Name Last Name) here. This person **MUST** be listed as a resident of the address with the U.S. Postal Service. If this is your address, write "N/A."

#5.b-5.e Write a valid mailing address in the U.S. It may be a residence, commercial address, or PO Box. You may not use TBI's address.

#6 If you listed a mailing address that is **NOT** your current physical living address, select "No" and complete **#7.a-7.e.** with your current physical address. If "Yes," write "N/A" in **#7.a-7.e.** Physical address should reflect where you actually live.



If you live outside of CA, please pay attention to the special mailing instructions later in the tutorial.

Part 2. Information About You (continued)

Your U.S. Mailing Address

5.a. In Care Of Name (if any)

5.b. Street Number and Name

5.c. Apt. Ste. Flr.

5.d. City or Town

5.e. State 5.f. ZIP Code
[\(USPS ZIP Code Lookup\)](#)

6. Is your current mailing address the same as your physical address?
 Yes No
If no, complete 7.a-7.d

NOTE: If you answered "No" to Item Number 6., provide your physical address below.

U.S. Physical Address

7.a. Street Number and Name

7.b. Apt. Ste. Flr.

7.c. City or Town

7.d. State 7.e. ZIP Code

Complete the Form I-765

PART 2, pg. 2, continued...

Other Information

#8 F-1 students do not have an A-Number, leave this blank.

#9 F-1 students do not have a USCIS Online Account Number, leave this blank.

#10-11 The responses to these questions should be straightforward. Please complete them accurately.

#12

Check “No” if you have never applied for an EAD.

Check “Yes” if you have previously applied for an EAD. You will need to provide copies of your previous EADs.

Note on 12: This question does not apply to previous on campus employment or CPT.

Other Information

8. Alien Registration Number (A-Number) (if any)

▶ A-

9. USCIS Online Account Number (if any)

▶

10. Gender Male Female

11. Marital Status
 Single Married Divorced Widowed

12. Have you previously filed Form I-765?
 Yes No

If yes, you will need to provide copy(s) of your previous EAD(s)



Complete the Form I-765

PART 2, pg. 2, continued...

#13.a.-17.b. Social Security Number (SSN)

#13.a. Check "Yes" if you have been issued an SSN and enter your SSN with one letter in each box.

#13.b. Skip this if you don't already have an SSN.

#14. Check "Yes" if you want a new or replacement SSN card and complete.

#15-17.b. Check "No" if you do not want a new or replacement SS card.

13.a. Has the Social Security Administration (SSA) ever officially issued a Social Security card to you?

If yes, complete 13.b. Yes No
If no, skip to 14

NOTE: If you answered "No" to Item Number 13.a., skip to Item Number 14. If you answered "Yes" to Item Number 13.a., provide the information requested in Item Number 13.b.

You should receive your Social Security card from SSA about 2 weeks after receiving your approved EAD from USCIS.

13.b. Provide your Social Security number (SSN) (if known).

▶

14. Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 15., Consent for Disclosure, to receive a card.)

If no, skip to 18
If yes, complete 15-17.b. Yes No

NOTE: If you answered "No" to Item Number 14., skip to Part 2., Item Number 18.a. If you answered "Yes" to Item Number 14., you must also answer "Yes" to Item Number 15.

15. Consent for Disclosure: I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security card. Yes No

NOTE: If you answered "Yes" to Item Numbers 14. - 15., provide the information requested in Item Numbers 16.a. - 17.b.

Father's Name

Provide your father's birth name.

16.a. Family Name (Last Name)

16.b. Given Name (First Name)

Mother's Name

Provide your mother's birth name.

17.a. Family Name (Last Name)

17.b. Given Name (First Name)



Complete the Form I-765

PART 2, pg. 2-3, continued...

The responses to these questions are straightforward. Please complete them accurately.

#18 Countries of Citizenship, pg2

List all as applicable (use Part 6 of the I-765 if needed) or write "N/A" in 18.b. if you do not have multiple citizenships.

#19-20 Place of Birth, pg3

List the name of the country as it was named when you were born, even if it's name has changed

Make sure your Date of Birth is in the correct format of MONTH - DAY -YEAR. (01/31/1998 not 31/01/1998)

Your Country or Countries of Citizenship or Nationality

List all countries where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in **Part 6. Additional Information**.

18.a. Country

Australia

18.b. Country

N/A

Place of Birth

List the city/town/village, state/province, and country where you were born.

19.a. City/Town/Village of Birth

Brisbane

19.b. State/Province of Birth

Queensland

19.c. Country of Birth

Australia

20. Date of Birth (mm/dd/yyyy)

01/31/1998

Complete the Form I-765

PART 2, pg. 3, continued...

Information About Your Last Arrival

#21.a. I-94 Number

Use your current I-94 number. This is at the number found on the electronic I-94 record or on the top left corner of the paper Form I-94 card (see example). I-94 numbers issued prior to May 2019 are 11 characters long and contain only numbers. Example: 01234567890. I-94 numbers starting in May 2019 have a format of 9 numbers, followed by a letter, then another number. Example: 012345678A1.

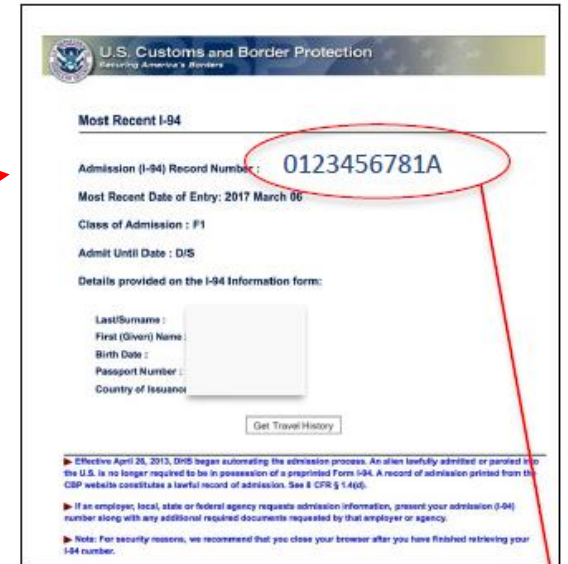
#21.b.-e. Passport Information

Enter the information directly from your passport. This passport should match the country on your I-20.

In cases where you entered the US on a passport that is now expired, enter the number of your expired passport. (You will provide information on the new passport on pg. 7 of the application.)

#21.c. Travel Document

Write "None" here.



Information About Your Last Arrival in the United States

21.a. Form I-94 Arrival-Departure Record Number (if any)

21.b. Passport Number of Your Most Recently Issued Passport

21.c. Travel Document Number (if any)

21.d. Country That Issued Your Passport or Travel Document

21.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy)



Complete the Form I-765

PART 2, pg. 3, continued...

#22 Date of Last Entry into the U.S.

Your most recent entry date can be found on your passport admission stamp, electronic I-94 record, or paper I-94 card.

#23 Place of Last Arrival into the U.S.

Name of the Port of Entry city from your most recent entry. This information can be found on your passport admission stamp, travel history section of your electronic I-94 record, or paper I-94 card (usually as a code, i.e. "SFR" for San Francisco). If you drove across the border, write the name of the city where entered the U.S.

#24 Immigration Status at Last Entry

Status in which you entered the U.S. If you entered with an I-20 as a student, write "F-1 Student."

#25 Current Immigration Status

Current status should be "F-1 student." If not, talk to a DSO, and this status should be reflected in your current I-94.

#26 SEVIS ID

Your SEVIS ID appears on the top left side of your I-20 and starts with Noo...

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)

23. Place of Your Last Arrival Into the United States

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)



Complete the Form I-765

PART 2, pg. 3, continued...

#27 Eligibility Category

Use the code **(c) (3) (B)** for eligibility category Post-Completion OPT. **DO NOT USE a different code!**

Information About Your Eligibility Category

27. Eligibility Category. Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).

(**C**) (**3**) (**B**)

#28-31.b. Other Eligibility Categories

Write “N/A” in these fields. N/A means not applicable. These questions are NOT applicable to applying for your 12-month Post Completion OPT. #28 is for STEM OPT Extension applicants only. Remember-you are applying NOW for your 12-Month Post-completion OPT, NOT the STEM OPT Extension.

28. (c)(3)(C) STEM OPT Eligibility Category. If you entered the eligibility category (c)(3)(C) in **Item Number 27.**, provide the information requested in **Item Numbers 28.a - 28.c.**

28.a. Degree

28.b. Employer's Name as Listed in E-Verify

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. (c)(26) Eligibility Category. If you entered the eligibility category (c)(26) in **Item Number 27.**, provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.
▶

30. (c)(8) Eligibility Category. If you entered the eligibility category (c)(8) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime?
 Yes No
Leave blank

NOTE: If you answered “Yes” to **Item Number 30.**, refer to **Special Filing Instructions for Those With Pending Asylum Applications (c)(8)** in the **Required Documentation** section of the Form I-765 Instructions for information about providing court dispositions.

31.a. (c)(35) and (c)(36) Eligibility Category. If you entered the eligibility category (c)(35) in **Item Number 27.**, please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in **Item Number 27.**, please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.
▶

31.b. If you entered the eligibility category (c)(35) or (c)(36) in Item Number 27., have you EVER been arrested for and/or convicted of any crime? Yes No
Leave blank

NOTE: If you answered “Yes” to **Item Number 31.b.**, refer to **Employment-Based Nonimmigrant Categories, Items 8. - 9.**, in the **Who May File Form I-765** section of the Form I-765 Instructions for information about providing court dispositions.



Complete the Form I-765

PART 3. Applicant's Statement, pg. 4

#1.a. Select 1.a. to indicate that you have read and understood the questions.

#3-6 Provide your information as requested

Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

- 1.a. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- 1.b. The interpreter named in **Part 4.** read to me every question and instruction on this application and my answer to every question in , a language in which I am fluent, and I understood everything.
2. At my request, the preparer named in **Part 5.**, , prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number
4. Applicant's Mobile Telephone Number (if any)
5. Applicant's Email Address (if any)
6. Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Complete the Form I-765

PART 3, pg. 4 continued...

Applicant's Declaration and Certification

Read the entire declaration carefully.

Applicant's Signature

#7.a.-7.b. Hand sign your name and provide the date of the signature.

Important!

Your signature will be scanned and must **fit within the box**. It must NOT touch the box outline. If the signature is too big and crosses a line, your application could be delayed. Be conservative and use a signature smaller than normal. Please see the example.

Troubleshooting Signature Line:

In some cases the "Don't forget to sign!" automatic reminder will not disappear when you print the form.

You should remove the auto filled "Don't forget to sign!"

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS

Applicant's Signature

7.a. Applicant's Signature
➔

7.b. Date of Signature (mm/dd/yyyy)

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

We recommend trying:

- To open the form in the most recent version of Adobe Reader.
- To print a blank version of the form's second page from your web browser.

Complete the Form I-765

PARTS 4 and 5, pgs. 4-6

These sections are not applicable to you, since you've completed the form yourself, so write "N/A." This section is for those who use an interpreter or other paid preparer to complete the form.

Part 4 pg. 4

Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

- 1.a. Interpreter's Family Name (Last Name)
N/A
- 1.b. Interpreter's Given Name (First Name)
N/A
2. Interpreter's Business or Organization Name (if any)
N/A

Part 4 pg. 5

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Mailing Address

- 3.a. Street Number and Name N/A
- 3.b. Apt. Ste. Flr. _____
- 3.c. City or Town _____
- 3.d. State ZIP Code _____
- 3.e. Province _____
- 3.f. Postal Code _____
- 3.g. Country _____

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number
N/A
5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:
I am fluent in English and N/A, which is the same language specified in Part 3, Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.

Interpreter's Signature

- 7.a. Interpreter's Signature
N/A
- 7.b. Date of Signature (mm/dd/yyyy) N/A

Part 5 pg. 6

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant (continued)

Preparer's Statement

- 7.a. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- 7.b. I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the Applicant's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

- 8.a. Preparer's Signature
N/A
- 8.b. Date of Signature (mm/dd/yyyy) N/A

Complete the Form I-765

Page 7, Part 6 needs to be completed **ONLY** if you:

- most recently entered the US on a passport that is no longer valid and you now have a renewed passport
- have previously had other SEVIS IDs
- have ever been authorized for CPT or OPT, or STEM OPT Extension
- If none of these apply to you, leave Page 7, Part 6 blank, but you must include it in your application. You are done with the I-765.

Complete the Form I-765

How to complete Page 7, Part 6 if you:

have ever been authorized for CPT, OPT, or STEM OPT

PART 6, Additional Information, pg. 7

#1.a.-1.c. Provide your name again as listed in Part 2, 1.a-1.c.

#2. Leave blank

#3.a.-3.c. Reference Pg. 2, Part 2, Item 12 (If you already used sections 3.a.-3.d. use the next available section, 4a-d, etc.)

#3.d. If you have had previous CPT and/or OPT, write “*see attached documentation for previous CPT and/or OPT authorizations*” and include copies of all previous CPT and OPT I-20s and EAD cards with your application.

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. A-Number (if any) ▶ A-

3.a. Page Number 3.b. Part Number 3.c. Item Number

3.d.

You may need to contact your previous schools if you are missing any of this information.

Complete the Form I-765

How to complete Page 7, Part 6 if you:

- most recently entered the US on a passport that is no longer valid and you now have a renewed passport

If this does not apply to you, leave Part 6 blank. You are done with the I-765; skip to the next slide.

PART 6, Additional Information, pg. 7

#1.a.-1.c. Provide your name again as listed in Part 2, 1.a-1.c.

#2. Leave blank

#3.a-3.c. Reference Pg. 3, Part 2, Item 21.b.

#3d. Write an explanation that clarifies that you have two passports: one that you used for entry but is no longer valid, and one that is currently valid.

#3.d. Include copies of both passports and your I-94 with your application.

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. A-Number (if any) ▶ A-

3.a. Page Number	3.b. Part Number	3.c. Item Number
<input type="text" value="3"/>	<input type="text" value="2"/>	<input type="text" value="21.b"/>

3.d.



Complete the Form I-765

How to complete Page 7, Part 6 if you:

- have previously had other SEVIS IDs

PART 6, Additional Information, pg. 7

#1.a.-1.c. Provide your name again as listed in Part 2, 1.a-1.c.

#2. Leave blank

#3.a.-3.c. Reference Pg. 3, Part 2, Item 26 (If you already used sections 3.a.-3.d. use the next available section, 4a-d, etc.)

#3.d. List all previously used SEVIS numbers, including from all previous F-1 /F-2 or J-1/J-2 programs in the U.S., including high school, short stays, language training schools, community colleges, or previous I-20s at TBI.

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number, Part Number, and Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. A-Number (if any) ▶ A-

3.a. Page Number	3.b. Part Number	3.c. Item Number
<input type="text" value="3"/>	<input type="text" value="2"/>	<input type="text" value="26"/>

3.d.

(These are examples only- use your own information from your previous I-20s or DS-2019s)

You may need to contact your previous schools if you are missing any of this information.



Complete the Form I-765

IF YOU COMPLETED any part of PAGE 7, PART 6,

you must add your signature and the date in the blank space at the bottom of page 7.

The diagram illustrates the signature and date area on Form I-765. It shows a large set of horizontal lines for a signature on the left and a smaller set of lines on the right. A blue arrow points from the top of the signature lines to a red-bordered box containing the signature "Oski Bear" and the date "August 1, 2018".

Complete the Form I-765



You are done with the I-765!

1. Review all the information on the form for accuracy. You must submit **ALL 7 pages** of the I-765.
2. Make a copy of your completed I-765 application to keep for your records, in case there is a problem with the application.
3. Next, gather the required documentation and copies... see the following slides.

Gather the Required Documentation

Photocopy of TBI OPT I-20 (all pages):

- Must be received by USCIS within 30 days of DATE ISSUED on page 1.
- Original must be signed by the DSO *before copying.*
- Original must be signed by the student at the bottom of page 1 *before copying.*
- The requested OPT start and end dates will appear on page 2.
- Do not mail the original I-20.

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N

SURNAME/PRIMARY NAME	GIVEN NAME	CLASS F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME	PASSPORT NAME	
COUNTRY OF BIRTH	COUNTRY OF CITIZENSHIP	
DATE OF BIRTH	ADMISSION NUMBER	
FORM ISSUE REASON CONTINUED ATTENDANCE	LEGACY NAME	

SCHOOL INFORMATION

SCHOOL NAME University of California at Berkeley University of California at Berkeley	SCHOOL ADDRESS Berkeley International Office, Berkeley, CA 94720
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL International Student & Scholar Advisor	SCHOOL CODE AND APPROVAL DATE SFR214F00615000 27 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL DOCTORATE	MAJOR 1 Political Science and Government, General 45.1001	MAJOR 2 None 00.0000
NORMAL PROGRAM LENGTH 48 Months	PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient
PROGRAM START DATE 21 JANUARY 2014	PROGRAM END DATE 18 DECEMBER 2015	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 12 MONTHS		STUDENT'S FUNDING FOR: 12 MONTHS	
Tuition and Fees	\$ 30,903	Personal Funds	\$ 0
Living Expenses	\$ 18,000	Dept. Support	\$ 48,903
Expenses of Dependents (0)	\$ 0	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
TOTAL	\$ 48,903	TOTAL	\$ 48,903

REMARKS

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

X _____ DATE ISSUED 05 October 2015 PLACE ISSUED Berkeley, CA
SIGNATURE OF: _____, International Student
Scholar Advisor

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

X _____ DATE _____
SIGNATURE OF: _____
NAME OF PARENT OR GUARDIAN SIGNATURE ADDRESS (city/state or province/country) DATE

ICE Form I-20 (3/31/2018) Page 1 of 3



Gather the Required Documentation

Photocopy of I-94 Information:

The I-94 can be either:

- An electronic I-94 record. Visit: www.cbp.gov/i94 to access and print your record.

OR

- A paper I-94 card stapled into your passport. Include a copy of both sides, even though the back side may be blank.

OR

- A copy of an I-797 Change of Status Approval Notice which includes a new I-94.



Most Recent I-94

Admission (I-94) Record Number : 2123456789

Most Recent Date of Entry: 2017 March 06

Class of Admission : F1

Admit Until Date : D/S

Details provided on the I-94 Information form:

Last/Surname : WANG
 First (Given) Name : WENYI
 Birth Date : 1958October26
 Passport Number : M123456
 Country of Issuance : China

[Get Travel History](#)

► Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

► If an employer, local, state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.

► Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.

Paper I-94 (front)

Paper I-94 (back)

Gather the Required Documentation

Photocopy of all previous OPT and CPT I-20s:

- Include copies of all previous CPT and OPT I-20s at TBI and previous schools.
- Old and new versions of the I-20 are acceptable.
- Copy **all 3 pages**.
- Keep the originals for your records.
- Copies of original I-20s are best, but you may need to request copies of any lost CPT/OPT I-20s.
 - TBI I-20s : request these from DSO when you turn in your OPT Request Form.
 - Previous School I-20s: contact them directly
- If you have never used CPT or OPT in the past, you do not need to include previous I-20s.

This is an 'Old Version' of Form I-20. It is a Certificate of Eligibility for Nonimmigrant (F-1) Student Status - For Academic and Language Students (DSO NO. 1511-0511). The form is filled out for a student named 'SEVTS' at the University of California at Berkeley. It includes fields for personal information, school information, and financial details. A large red watermark 'Old Version' is overlaid on the form.

This is a 'New Version' of Form I-20. It is a Certificate of Eligibility for Nonimmigrant (F-1) Student Status - For Academic and Language Students (DSO NO. 1511-0511). The form is filled out for a student named 'SEVTS' at the University of California at Berkeley. It includes fields for personal information, school information, and financial details. A large red watermark 'New Version' is overlaid on the form. The form also includes a section for 'PROGRAM OF STUDY' and 'FINANCIALS'.



The Application Deadline

- USCIS must **receive** your complete OPT application no later than 30 days after the OPT I-20 Issue Date on page 1.
 - The issue date is located next to the advisor's signature on page 1 of the OPT I-20. Please account for mailing time.
- Additionally, USCIS must receive your application before the end of your 60 day grace period.
- Track the status of your mailed application to be certain it was delivered on time.

Your application must be submitted to USCIS from within the U.S. If you exit the U.S. after your program completion date without applying for OPT, you cannot return and will lose your option for OPT.

We recommend that you apply early.

Department of Homeland Security U.S. Immigration and Customs Enforcement		I-20, Certificate of Eligibility for Nonimmigrant Student Status OMB NO. 1653-0038	
SEVIS ID: N			
SURNAME/PRIMARY NAME		GIVEN NAME	CLASS
PREFERRED NAME		PASSPORT NAME	F-1
COUNTRY OF BIRTH		COUNTRY OF CITIZENSHIP	
DATE OF BIRTH		ADMISSION NUMBER	ACADEMIC AND LANGUAGE
FORM ISSUE REASON CONTINUED ATTENDANCE		LEGACY NAME	
SCHOOL INFORMATION			
SCHOOL NAME University of California at Berkeley University of California at Berkeley		SCHOOL ADDRESS Berkeley International Office, Berkeley, CA 94720	
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL International Student & Scholar Advisor		SCHOOL CODE AND APPROVAL DATE SFR214F00615000 27 JANUARY 2003	
PROGRAM OF STUDY			
EDUCATION LEVEL DOCTORATE	MAJOR 1 Political Science and Government, General 45.1001	MAJOR 2 None 00.0000	
NORMAL PROGRAM LENGTH 48 Months	PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	
PROGRAM START DATE 21 JANUARY 2014	PROGRAM END DATE 18 DECEMBER 2015		
FINANCIALS			
ESTIMATED AVERAGE COSTS FOR: 12 MONTHS		STUDENT'S FUNDING FOR: 12 MONTHS	
Tuition and Fees	\$ 30,903	Personal Funds	\$ 0
Living Expenses	\$ 18,000	Dept. Support	\$ 48,903
Expenses of Dependents (0)	\$ 0	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
TOTAL	\$ 48,903	TOTAL	\$ 48,903
REMARKS			
SCHOOL ATTESTATION			
I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school or the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.			
X	SIGNATURE OF: Scholar Advisor	DATE ISSUED 05 October 2015	PLACE ISSUED Berkeley, CA
STUDENT ATTESTATION			
I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.			
X	SIGNATURE OF:	DATE	
	NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country) DATE



TOP 3 MOST COMMON OPT DENIAL REASONS

1. Payment problems:

- Check or Credit Card payment: Money is not in account at time of processing
- incorrect fee amount
- Check, money order, or credit card form not completed properly
- Wrong dates on check, money order (U.S Date style = MONTH/DAY/YEAR = MM/DD/YYYY)

2. Copy of OPT I-20 (pages 1-3) is TOO OLD

- New applications: USCIS must **receive** your complete OPT application no later than 30 days after the OPT I-20 ISSUE DATE on page 1 of the I-20.
- Resubmission after OPT Rejection or Denial-If your OPT is REJECTED OR DENIED you must NOTIFY DSO that your OPT has been rejected or denied. You will need to request a NEW OPT I-20 recommendation FROM DSO before you resubmit your OPT application. Again-USCIS must **receive** your new, complete OPT re-application no later than 30 days after the OPT I-20 ISSUE DATE on page 1 of the I-20.

3. I-765 problems:

- Incomplete or incorrect form fields
- Not signed

Applications may be rejected or denied for other reasons. These are the most common reasons as observed by DSO advisers.

If your application is rejected or denied you might still be able to re-apply to USCIS before the end of your 60-day grace period.

If you receive a Rejection or Denial (or Request for Evidence) notify the DSO immediately, and ask for advice before your response. The DSO sees many re-application denials which could have been avoided by consulting an adviser before response.

Mailing the OPT Application from Illinois

USCIS Chicago Lockbox

U.S. Postal Service (USPS):

Attn: I-765 C03

P.O. Box 805373

Chicago, IL 60680-5374



If using USPS, choose Express or Priority Mail option and use the above address. Be sure your mailing option includes tracking and guaranteed delivery.

FedEx, UPS, and DHL deliveries:

USCIS

Attn: I-765 C03 (Box 805373)

131 South Dearborn - 3rd Floor

Chicago, IL 60603-5517



TBI recommends FedEx as a reliable option. If using FedEx, DHL or UPS, use the above address. Be sure your mailing option includes tracking and guaranteed delivery

Based on your eligibility category and where you live. For a list of eligibility categories and descriptions, please see the link [Direct Filing Addresses for Form I-765, Application for Employment Authorization](#)

Step 3: Receive the Employment Authorization Document (EAD)

I-797C Notice of Action

You should receive the notice by mail within 2-4 weeks after mailing the OPT application to USCIS.

- **The I-797C is very important.**
If you lose the receipt, it may be very difficult to replace it.
- **The I-797C is necessary if you want to:**
 1. inquire about the status of your OPT application.
 2. travel outside the U.S. while your OPT is pending.

Receipt Number

The case number for the OPT application at USCIS. Check the status of the case on the USCIS web site at <https://www.uscis.gov>

Received Date

Date when USCIS begins processing the application. (It may not be the actual the application was received, but it is when the case was entered into the system.)

Address Information

Verify your name, date of birth, and address on the I-765 receipt notice. If incorrect, contact the DSO immediately.

Contacting USCIS

If you have any problems or questions with the OPT application, contact the DSO before calling the USCIS Customer Service.

Department of Homeland Security
U.S. Citizenship and Immigration Services

Form I-797C, Notice of Action

THIS NOTICE DOES NOT GRANT ANY IMMIGRATION STATUS OR BENEFIT.

NOTICE TYPE Receipt	NOTICE DATE April 11, 2012
RECEIPT NUMBER WAC...	RECEIVED DATE April 11, 2012
1-765 Application for Employment Authorization	PAGE 1 of 1
	DATE OF BIRTH December 19, 1982

Your Name
Mailing Address Listed on your I-765
Berkeley, CA

PAYMENT INFORMATION:
Application/Petition Fee: \$385.00
Biometrics Fee: \$0.00
Total Amount Received: \$385.00
Total Balance Due: \$0.00

APPLICANT/PETITIONER NAME AND MAILING ADDRESS

The above application/petition has been received by our office and is in process.

Please verify your personal information listed above and immediately notify the USCIS National Customer Service Center at the phone number listed below if there are any changes.

Please note that if a priority date is printed on this notice, the priority does not reflect earlier retained priority dates.

If you have questions about possible immigration benefits and services, filing information, or USCIS forms, please call the USCIS National Customer Service Center (NCSC) at 1-800-375-5283. If you are hearing impaired, please call the NCSC TDD at 1-800-797-1833. Please also refer to the USCIS website: www.uscis.gov.

If you have any questions or comments regarding this notice or the status of your case, please contact our customer service number.

You will be notified separately about any other case you may have filed.

USCIS Office Address:
USCIS
California Service Center
P.O. Box 30111
Laguna Niguel, CA 92607-0111

USCIS Customer Service Number:
(800)375-5283

Form I-797C, Lockbox ID #: 04-0212 Y



USCIS Issues & Tracking Your Case

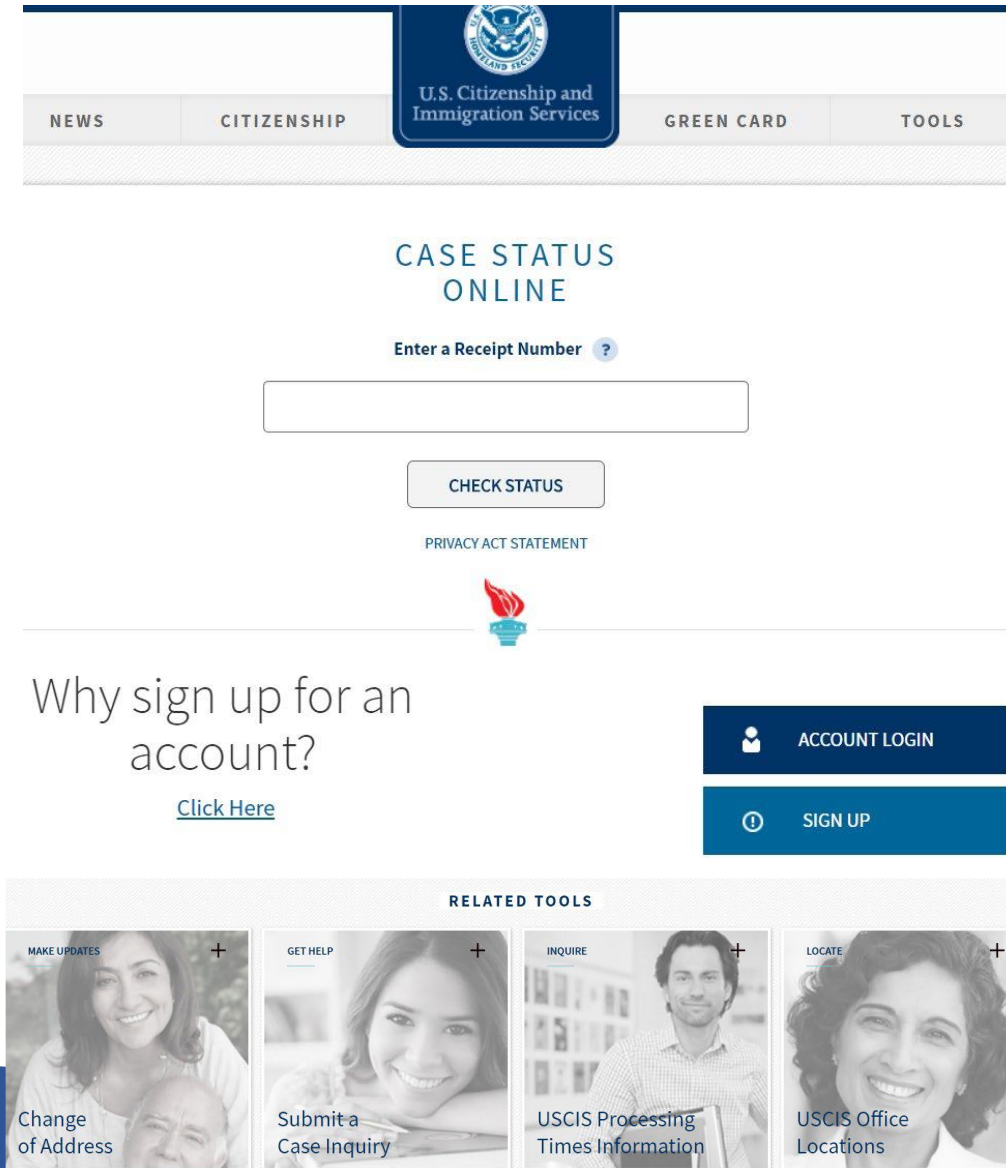
Sign up for an account at <https://www.uscis.gov>. This will allow you to receive automatic updates and monitor your case. Click “Check Your Case Status” and then select “Sign Up.”

General Case Tracking:

If you don’t sign up for an account, you can still track your case using the “Check Your Case Status” Tool.

Address Changes:

If your address changes, you can update it online through the “Change of Address” tool. Keep in mind that address changes can take 10 business days to process, and could jeopardize your OPT EAD delivery. We recommend keeping the same address for your entire OPT processing, if possible.



USCIS Issues: Case Inquiries & Expedites

Case Inquiries & Processing times:

You can submit inquiries and requests about your case using the Case Inquiry tool for these issues:

- If you don't receive your receipt notice, EAD or other notifications
- If your case is pending longer than the normal processing time. See current USCIS processing times for Form "I-765" for "Potomac Service Center" here: <https://egov.uscis.gov/processing-time/>
- If there is an error on your receipt notice or EAD card

Expedites:

USCIS almost always denies F-1 student expedite requests for OPT. You can find expedite criteria here:

<https://www.uscis.gov/forms/how-make-expedite-request>. USCIS may consider expediting if the request meets one or more of the following criteria:

- Severe financial loss to a company or person, if expedite is not due to applicant's failure: (1) to file the benefit request in a reasonable time frame; or (2) to respond to any RFE in a timely manner;
- Urgent humanitarian reasons;
- Compelling U.S. Government interests (such as urgent cases for the Department of Defense or DHS, or other public safety or national security interests); or
- Clear USCIS error.

NOTE: 1) Severe financial loss to a company means the **company would be at risk of failing**. 2) The need to obtain employment authorization, standing alone, **without evidence of other compelling factors**, does not warrant expedited treatment

Application Problems: RFE and Rejection/Denial

RFE

If there is a problem with your application, the USCIS may send you a notice by mail called a “Request for Evidence (RFE).” An RFE does not mean that your application has been rejected. It simply means that you need to send in additional documents before your EAD can be issued.

- Getting an RFE will delay the processing of your application.

Rejection/Denial

In some cases, the USCIS will return the entire application to you. If this happens, you must make corrections and send a new application before the end date of your 60-day grace period.

NOTIFY the DSO that your OPT has been rejected or denied! You **MUST** request a NEW OPT I-20 recommendation from the DSO **before** you resubmit your OPT application. USCIS must **receive** your new, complete OPT re-application no later than 30 days after the OPT I-20 ISSUE DATE on page 1 of the I-20.

U.S. Department of Homeland Security
U.S. Citizenship and Immigration Services

Notice of Action

Application Number: []
Receipt Number: []
Date Filed: JUN 23, 2006 Page: 1 of 3

Request for Evidence

INFORMATION: WHEN YOU HAVE COMPLETED THE INFORMATION ON THIS NOTICE, KNOWING THIS NOTICE ON TOP OF ALL REQUESTED DOCUMENTS AND OR FORMS, RETURN TO THE ADDRESS BELOW. THE OFFICE HAS EXTENDED YOUR PETERSON APPLICATION. WITH INFORMATION DOCUMENTS.

THE INFORMATION REQUESTED BELOW MUST BE RECEIVED BY THE OFFICE NO LATER THAN YOUR DEADLINE AND MUST BE FROM THE SOURCE OF THIS NOTICE. IF YOU DO NOT FURNISH THE REQUESTED INFORMATION WITHIN THE TIME SPECIFIED, YOUR APPLICATION WILL BE CONSIDERED ABANDONED PURSUANT TO 8 C.F.R. 101.12(b)(1) AND AS SUCH, WILL BE DENIED.

RETURN THIS NOTICE ON TOP OF THE REQUESTED INFORMATION LISTED ON THE ATTACHED SHEET.

NOTE: You are given until **SEPTEMBER 23, 2006** in which to submit the information requested.

Pursuant to 8 C.F.R. 101.12(b)(1) failure to submit ALL evidence requested at one time may result in the denial of your petition.

For more information, visit our website at: WWW.USCIS.GOV

Or call us at: 1-800-375-5283

Telephone service for the hearing impaired: 1-800-767-1833

You will be notified separately about any other applications or petitions you filed. Save a photocopy of this notice. Please include a copy of it if you write to us about this case, or if you file another application based on this decision. Our address is:

U.S. CITIZENSHIP AND IMMIGRATION SERVICES
CALIFORNIA SERVICE CENTER
P.O. BOX 10190
LAGUNA NIGUEL, CA 92607-0190
(949) 831-9433

Bar Code Label Sheet

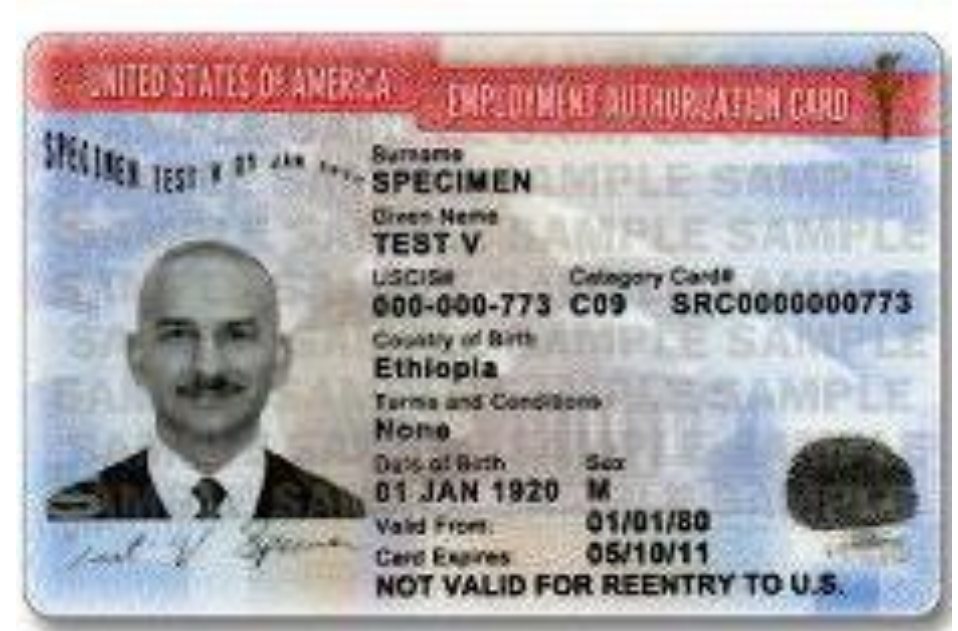
Form I-907 (5/06) Please see additional information on the back.

Contact the DSO IMMEDIATELY if you receive an RFE, rejection, or denial.

To avoid delays, review your application materials for completeness and sign all the forms before mailing them to the USCIS.

The Employment Authorization Document (EAD)

- Review your EAD card to make sure the information is accurate. If it is not, contact the DSO at TBI immediately!
- Present your EAD to employers as proof of your legal work authorization in the US.
- The EAD is a required document for entry to the U.S. during OPT.
- You can **ONLY** work during the dates listed on the approved EAD card-not before and not after!
- Submit a copy of your EAD card to the DSO at Taylor Business Institute.



Driver License Applications & Renewal

- If your Illinois Driver License has expired, you can only renew the license after your OPT EAD has been approved.
- This is because your I-20 has expired, and without proof of the OPT approval (and continuing F-1 status) you won't qualify to renew the license.
- If you live in a state other than Illinois, check with the local DMV regarding requirements for renewal



REAL ID
Gold Star
Designation

Avoiding Immigration Scams

- It is very rare for USCIS or SEVP to contact you via phone regarding your application or your SEVIS record. Most notices from SEVP Portal are sent by email, and most notices from USCIS are sent via mail. They will generally never ask you for money.
- See USCIS's website on how to avoid [immigration scams](#), report fraud, and find [authorized legal services](#).
- You can report immigration scams by contacting the FTC. Please visit the USCIS [Avoid Scams Initiative](#) website to learn more about avoiding immigration scams and reporting fraud.

Your Responsibilities during OPT

1. Reporting Requirements
2. Employment Requirements
3. Travel Documents for Re-entry
4. Applying for an F-1 Visa on OPT

1. Reporting Requirements:

Taylor Business Institute DSO - Mandatory

- ALL STUDENTS ON OPT ARE REQUIRED TO SUBMIT OPT UPDATES TO THE DSO AT TBI.

SEVP Portal—OPTIONAL

- The Student Exchange Visitor Program (SEVP) has its own “SEVP Portal” for students on OPT. On Day 1 of your Approved OPT, you will receive an email from SEVP with instructions on how to create an account. This email will come from do-not-reply.sevp@ice.dhs.gov.
- Be aware of scams—SEVP will NEVER ask you for a payment to register to register for the optional SEVP Portal.
- Registration for SEVP Portal is OPTIONAL.

Reporting Requirements: TBI DSO

ALL STUDENTS ON OPT ARE REQUIRED TO SUBMIT OPT UPDATES TO THE DSO AT TBI.

The following information must be reported to the DSO at TBI during the post completion OPT period of authorization within 10 days of any changes:

- Your residential address
- Your phone and email address
- Employer's name
- Employer's address
- Job Title(s)
- Explanation of how your job(s) relates to your major area of study at TBI (see following section for further detail)
- Start and/or end dates of employment
- Any periods of unemployment
- Date of exiting the U.S. (You must provide date of exit if you decide to exit the U.S and complete your OPT status prior to the end date of your OPT)
- If your visa status changes while on OPT
- You are required to update this information within 10 days of any changes. Keep a receipt copy of the web site each time you report a change.

2. Employment Requirements

- You can only work during the dates listed on your approved OPT card.
- You must work a minimum of 20 hours per week in a position related to your field of study. For more information, visit [“Qualifying OPT Employment.”](#)
- You cannot exceed more than **90 days of unemployment** while on OPT. Days of unemployment prior to your EAD start date do not count towards the 90 days. It is your responsibility to keep records of your employment and any periods of unemployment.
- For more information see: [OPT Unemployment Allowances](#)
- Cannabis Industry - be aware that use and sale of cannabis is illegal at the federal level, although it may be legal in some U.S. states. To avoid possible deportation or inadmissibility from the U.S., students should avoid positions related to federally illegal substances.

Direct Relation to Degree

- Federal regulations require that F-1 students on OPT provide a description of how their employment relates to their major area of study.
- There must be a logical connection between the duties involved in the OPT employment and the student's major area of study. In the written description, the regular duties should be explained and the connection between those duties and the degree should be described

Examples: Direct relation to degree

- 1. Electronics Engineering:** I work full time as an Electronics Engineering Technician at ABC Corp., a government contractor. In my job, I analyze and test electronics and electrical systems for quality assurance. My work requires understanding of electronics and electrical circuit theory, which I studied in-depth at the University of ABC.
- 2. Accounting and Business:** I work full time as a Bookkeeper at a mortgage company, Happy Homes, where I perform journal entries, enter vendor invoices and reconcile with other departments. On a daily basis, I use the knowledge I gained in accounting and businesses classes that I took as part of my major program of study.
- 3. Allied Health:** I am working at a hospital medical records office. I process billing claims for patients seen at the hospital. On average, I work at the hospital 35 hours a week. My duties directly utilize the skills and knowledge I acquired from my coursework and degree in allied health.
- 4. Criminal Justice & Security Administration:** I am working 25 hours a week in a health food store as a security officer., monitoring through surveillance cameras any possible theft in the store. My expertise in preventing loss for my employer are a result of my studies and classwork in criminal justice and security administration program.

3. Travel Documents for Re-entry

Documents	Before Completing Program & Before EAD issuance	After Completing Program & Before EAD issuance	After Completing Program & After EAD issuance
Valid Passport	✓	✓	✓
Valid F-1 visa stamp (if applicable)	✓	✓	✓
OPT I-20 with a valid travel endorsement signed within 6 months by a TBI DSO (page 2)	✓	✓	✓
Evidence of continued enrollment (e.g. Enrollment Verification from the Registrar Office)	✓		
Evidence of financial support	Strongly recommended	Strongly recommended	Strongly recommended
OPT receipt: I-797 Notice of Action		✓	
Job offer letter from employer		Strongly recommended	✓
EAD (Employment Authorization Document)			✓

Your admission to the U.S. is always at the discretion of the Customs and Border Protection Officers. To avoid problems, you must have the required documents outlined above.

Important Information on Travel

- Avoid long absences from the U.S. during the OPT period. Time spent outside of the U.S. while unemployed by a U.S. employer counts toward your 90 days of unemployment.
- Attempting to re-enter the U.S. close to the expiration date of your OPT can be risky.
- You must not enter the U.S. in a status other than F-1. This may result in the loss of your OPT eligibility.

Travel after Program Completion, But Before OPT Card is received

- There is a higher risk associated with travel and return while your OPT is pending after the program completion date. If there are any problems with your application, you may not be able to respond to USCIS in a timely manner, which could delay processing of your EAD.
- If your OPT application is denied while outside the U.S., you will not be able to re-enter the U.S. in F-1 status and will not be able to reapply.

4. Applying for an F-1 Visa on OPT

If you are traveling abroad and your F-1 visa has expired, you must obtain a new F-1 visa before returning to the U.S. When going to your visa interview, bring the documents below. For more information, visit: <http://www.tbiil.edu/opt>

1. Valid passport
2. Valid I-20 with travel endorsement from the DSO at TBI within the past 6 months
3. Unexpired EAD Card
4. Job offer letter or proof of current employment directly related to your field of study
5. Evidence of sufficient funds (e.g. a bank statement, a letter from a sponsor or a job offer letter)

Check the U.S. Department of State web site for more information about getting a visa and specific requirements at the local embassy or consulate at www.travel.state.gov

5. Completing OPT & Grace Period

You have a 60 day grace period following the end of the OPT EAD.

- Failure to exit, continue your F-1 status, or timely file an Extension or USCIS Change of Status will result in accrual of days of unlawful presence.

If you do not extend your OPT, and your EAD expires, you have the following options before the end of the 60 days grace period:

1. Exit the US within 60 days
2. Continue your F-1 Status & Studies: Transfer your I-20 to continue studies at another school OR request a Change of Educational Level to begin new studies at Taylor Business Institute.
3. Work with immigration legal counsel regarding a Change of Status application to a new visa category. *You will need to check with your legal counsel regarding your allowed period of stay or required exit date if you have a pending change of status when your grace period ends.*

More Information

Consult the Taylor Business Institute [OPT webpage](#) for detailed information related to:

- Frequently Asked Questions (FAQs)
- Address and Employer Reporting System
- Types of Qualifying Employment
- 90-Day Unemployment Rule
- Beginning a New Program of Study
- Taking Classes While on OPT
- Traveling Outside the U.S.
- Early Completion of OPT

Final check of your OPT application

Want to review all your documents in detail before mailing them to USCIS?

Still have questions?

Come see the DSO in person at TBI International Student Office.



Taylor Business Institute

International Student Office

Roney Kumi, DSO

roney.kumi@tbiil.edu

(312) 658-5114

Education Office

Syed Faizuddin Misbah

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