



For IPS office use only:

Canvas: ____ Banner: ____ Enrolled: ____

- In-person Review:

Date: ____ Time: ____

- Email Review: Yes ____ / No ____

Initials: ____

OPT Recommendation Form

This information is required by the IPS Office for F-1 visa students.

To Be Completed By Student

First and Last Name:

M Number:

MTU Email:

Undergraduate:

Graduate:

Proposed OPT Start Date*

Current I-20 End Date:

SEVIS Number:

*You may request a start date no more than 60 days after your program end date.

If you have an employer, you must add the employment information to the OPT request Google form along with this form and the Canvas course score grades.

STOP if you are failing or having trouble in a class. **DO NOT** apply for OPT. Once you apply, it **CANNOT** be canceled; which means, if you have to repeat a course, you must do so WHILE on your 12-month OPT.

I understand that if I fail a necessary course and not able to graduate this semester and my OPT is pending/approved, I will remain on OPT while I finish the requirements to graduate.

Michigan Tech is required by federal regulation to maintain your SEVIS record for the full period of OPT including OPT STEM Extension. By signing this form, you certify that the information is correct:

- I will report any changes to my U.S. Future Mailing Address within 10 days in Banweb and the SEVP Portal.
- I will report any employment changes or updates including unemployment within 10 days on the SEVP Portal and fill out the OPT Employment/Unemployment Form on the IPS website.
- I understand while on OPT, I cannot be unemployed for more than 90 days.

Student Signature _____

Date _____

To Be Completed By Academic Advisor, Department Chair or Graduate Program Director

The student listed is requesting Optional Practical Training in their field of study. In order to issue OPT, IPS is required to obtain the following information. Please complete and sign below. Please do not sign this form if the student is not in good academic standing.

Master's and Ph.D. students may define program completion as the day when all coursework is completed. Students may apply for post-completion OPT if all they have is thesis remaining. However, students must complete their degree requirements before the 12-month OPT ends.

Student Name: _____

1. If the above named student is in coursework. Provide current term end date: _____ MM/DD/YYYY

2. Do you approve this student's request to apply for OPT in the current semester (note: students can continue to complete a report/thesis/dissertation while an official OPT decision is pending and/or during their approved OPT period)? **Yes** ____ **No** ____

3. If you approve this request in the current semester, by what date do you believe this student will be ready for OPT with respect to their commitments to you as an advisor other than completing their report/thesis/dissertation (note: this date could be the end of the current semester or earlier if you anticipate this student will complete their non-report/thesis/dissertation commitments to you prior to that date)? **Date:** _____ MM/DD/YYYY

DO not sign off on this form if the student is not passing classes or is not expected to graduate at the end of this semester.

Academic Advisor's Name _____

Academic Advisor Signature _____