

OPT Acknowledgement Form

All international students who intend to participate in Optional Practical Training (OPT) must abide by all rules associated with this practical training experience in order to maintain their F-1 student visa status. Please read each of the statements listed below carefully. Add your signature and today's date at the end of this form to acknowledge that you understand and agree to abide by all of the rules mentioned below.

I understand that I must complete all of my degree requirements by my intended graduation date in order to apply for OPT and that it is my responsibility to ensure that I graduate on the program end date indicated on my OPT I-20.

I understand that participation in OPT is **not** guaranteed. Therefore, I will take the appropriate steps to make sure that I have a plan for my employment in the event that I need to return to my home country after graduation.

I acknowledge that it generally takes between 3 - 5 months after the date on which my OPT application was filed in order to receive my EAD card, and that I can check the latest I-765 processing times at *egov.uscis.gov/processing-times*

I understand that there are two conditions in order to begin my OPT employment: 1. I need to have received my Employment Authorization Document (EAD card), and 2. I cannot start working until the start date indicated on my EAD card.

I understand that I cannot work *after* the end date on my EAD card, unless I have a pending STEM extension request or H-1B petition filed with USCIS.

I understand that my OPT employment authorization is only for work that is **directly related to my field of study**. I know that engaging in work that is unrelated to my degree program is considered illegal employment and constitutes a violation of my F-1 status.

I understand that OPT is employment-dependent, and that accruing an aggregate of 90 days of unemployment during my employment authorization period will result in the termination of my SEVIS record.

I understand that my passport must be valid at the time of OPT authorization, and that it is my responsibility to maintain the validity of my passport throughout the duration of my OPT period.

I understand that I must report all changes of address to the International Student & Scholar Services Office at <u>isss@oswego.edu</u> within **10 days** so that they can update my SEVIS record.

I understand that it is my responsibility to obtain a travel signature (on page 2 of my OPT I-20 in the Travel Endorsement section) from the International Student & Scholar Services Office if I am going to travel outside the United States while I am on OPT. I understand that a travel signature is only valid for **six months** during the OPT authorization period.

I acknowledge that it is my responsibility to maintain health insurance coverage for myself and my dependents while on OPT. I agree to submit the "Maintaining health insurance while on OPT" form to the International Student & Scholar Services Office at least two weeks prior to my graduation date. I understand that if I do not submit this form then I will no longer receive health insurance through SUNY Oswego after my graduation date.

NOTE: Please review back of page and sign acknowledgement



I understand that it is my responsibility to keep my record employment (including information regarding my current employer as well as employment start and end dates) updated and accurate. I will input and update these details as necessary at: sevp.ice.gov/opt
Concerning OPT and travel, I acknowledge the following:
If I travel while my OPT application is pending and the EAD card is issued prior to my return to the United States, in order to reenter the United States I must have a job, documentation evidencing my employment, and my EAD card.
If I travel before my EAD card is issued, I understand that I may be asked for evidence to show that I am looking for a job upon attempting to reenter the United States.
If I am travelling after my EAD card is issued, I can only reenter the United States to resume employment, meaning that I must already have a job offer and must be able to present documentation of this.
I understand that traveling outside the U.S. before receiving my EAD card and a job is risky. I accept all risks if I travel.
I acknowledge that I have read the statements above and agree to abide by them:
The email address that you check most frequently (Your SEVIS record will be updated accordingly):
Student's expected graduation date (mm/dd/yyyy):
Student's desired OPT start date (mm/dd/yyyy):
Student's name:
Student's signature: Date (mm/dd/yyyy):