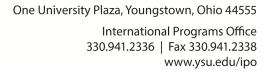


One University Plaza, Youngstown, Ohio 44555 International Programs Office 330.941.2336 | Fax 330.941.2338 www.ysu.edu/ipo

Optional Practical Training (OPT) Recommendation Form

To the Student: Complete the following information.				
Family Name:	First Name:	Y Numb	oer:	
Non-YSU e-mail:	Phone Number:			
Address:(Street # and Name)	(6)	(2)		
		(Sta	ate & Zip Code)	
☐ Check here if you have a secondary MAJ	OR.			
OPT Start Date:	OPT End	l Date:		
Have you applied for OPT before?: ☐ No ☐ Y I attended an OPT session on	Student Si	gnature:		
 To: Academic Advisor or Authorized I The above-named student is applying for perr for F-1 students. OPT is employment in a job formal, classroom education. U.S. Immigration IPO must have a statement from the stu degree requirements. The date of complet all requirements for the degree program ar PhD students are eligible to start OPT one 	mission to engage in empore related to the student's for and Citizenship Services dent's academic advisor ion is not necessarily the expected to be fulfilled.	loyment for OPT as provided in a field of study and is intended to e (USCIS) will authorize OPT. indicating the date the student is end of the term or the graduation	enhance and supplement the is expected to complete all date, but the date by which	
Please complete the information below and requestions, please call IPO at 330-941-2336.				
The information below must be co	ompleted and signed	by the <u>academic advisor</u> ,	not by the student.	
This is to certify that the student listed above is	s expected to complete all	requirements for the degree on		
and will receive the degree		in the field/major of		
(Date: mm/dd/yyyy)	(Level)		(Field of Study)	
(Printed name of Academic Advisor)	(Signature of Ac	rademic Advisor)		
(Telephone Number and/or email address)	(Date)			





12-month Optional Practical Training (OPT) Attestation

Initial each box to indicate that you have read and understood each item.				
I certify that:				
	I understand that all work during the OPT period mus study at Youngstown State University.	t be directly related to my level and field of		
	I am aware of the timelines to apply for OPT and under my OPT application will be denied.	erstand that if I do not adhere to these timelines,		
	 USCIS must receive your application: No more than 90 days before your program co No more than 60 days after your program com Within 30 days of receiving your I-20 with Ox 	npletion date		
	I understand that I must report any address or employ following two reporting portals; SEVP reporting portal - This portal allows you to upd YSU OPT reporting portal - Upon updating this portal behalf.	ate SEVIS directly.		
	I understand that I cannot begin working until I receive within the start and end dates printed on the card.	te the physical copy of the EAD card and am		
	I understand that during my 12-month period of OPT, If unemployed for more than 90 days, I understand that	* *		
	If traveling internationally, I will make a timely reque least one week before traveling outside the U.S.). To to (isss@ysu.edu) for next steps.			
	If my immigration status changes, I will notify IPO by my new status so that my F-1 SEVIS record can be pr	1		
	I will always provide a current email address to IPO a I am aware of any changes pertaining to my immigrat			
Name (printed)				