

STEM Optional Practical Training (OPT) Application

Step I – Review the OPT Presentation on the OIS Website before Completing the Application

Step II – Submit the Following Documents to the Office of International Services

- STEM Optional Practical Training (OPT) Request Form & STEM OPT Employer Verification Form
- Completed Forms I-765 & G-1145 (OIS Will Review the Forms I-765 & G-1145 and Return Them to You)
- A Self-Addressed, Stamped Return Envelope for Applicants Who Cannot Pick Up Their Documents from OIS

Step III – Pick up All of Your Documents from the Office of International Services

OIS Will Contact You by Email When Your New I-20 is Ready. This New Document Will Reflect Your Requested STEM OPT Start and End Dates. At This Time We Will Also Return Your Form I-765.

Step IV – Prepare All of the Following Documents and Mail Your Complete OPT Application to USCIS Within 30 Days*

- Check or Money Order** Payable to "Department of Homeland Security" – Current Fee Available At:
<http://www.uscis.gov/portals/site/uscis/menuitem.5af9bb95919f35e66f614176543f6d1a1?vgnextoid=73ddd59cb7a5d010VgnVCM10000048f3d6a1RCRD&vgnnextchannel=db029c7755cb9010VgnVCM10000045f3d6a1RCRD>
- Completed Form I-765**
- Photocopy of Pages 1 and 3 of any OPT and CPT I-20s** That You Have Had, Including Your New I-20.
- Photocopy of I-94** (Front and Back)
- Photocopy of Any Previous EADs** That You Have Had (Make Sure the Copy is Legible)
- Photocopy of Relevant Passport Pages** (Picture and Biographical Information Page and Your U.S. Visa Page)
- Two Identical Color Photos (Passport Style)** With a White Background Taken Within 30 Days of Your OPT Application Submission to USCIS. They Should Not Be Altered In Any Way. They Should Be Printed on Thin Photo Paper in a Frontal, Passport Style. Headpieces are Acceptable if Worn Daily or For Religious Purposes. Photos Should Be 2 x 2 Inches, With the Height of the Head Between 1 and 1-3/8 Inches. Lightly Print Your I-94 Number and Full Name on the Back of Each Photo with a Pencil. Please Refer to the USCIS Website at the Link Included Above for Further Details, If Needed.
- A Copy of Your Diploma**
- Form G-1145 (Optional):** E-Notification of Application/Petition Acceptance. Submit This Form Only if You Wish to be Notified by Text Message or Email when Your Application is Received. The G-1145 Should be Stapled to the Front of Your Form I-765.

*Application Must be Received by USCIS Within 30 days of the Print Date on the STEM OPT I-20.

It can take up to 3½ months for your OPT Application to be processed by the United States Citizenship and Immigration Services (USCIS). For current USCIS processing times, please visit their Website:

https://egov.uscis.gov/cris/processTimesDisplay/init.do;jsessionid=cbactdj7Co_zwbb8hNs1s.

If USCIS receives your STEM Application prior to your current OPT End Date, you may continue working for 180 days until you receive your STEM OPT approval based on your STEM OPT receipt notice. You must submit all of your documents to USCIS within 60 days of your OPT End Date.

- OIS recommends that you copy all of your documents for your records and that you mail your package using an Express Courier Service.
- USCIS will mail you a receipt notice within a few weeks. If you have not received this receipt within 6 weeks, contact OIS.
- Submit a copy of your EAD card to OIS once it arrives. Contact OIS for any questions that you have.

Send Your Complete Application to:

<p>If You Live In: Alaska, Arizona, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, North Dakota, Ohio, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming, Guam, or the Commonwealth of Northern Mariana Islands</p>	<p>File your application at: USCIS Phoenix Lockbox U.S. P.S. Deliveries: USCIS, PO Box 21281 Phoenix, AZ 85036 Express Courier Deliveries: USCIS, Attn: AOS 1820 E. Skyharbor Circle S Suite 100 Phoenix, AZ 85034</p>	<p>If You Live In: Alabama, Arkansas, Connecticut, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Mississippi, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, Oklahoma, Tennessee, Texas, Vermont, Virginia, U.S. Virgin Islands, or West Virginia</p>	<p>File your application at: USCIS Dallas Lockbox U.S. P.S. Deliveries: USCIS, PO Box 660867 Dallas, TX 75266 Express Courier Deliveries: USCIS, Attn: AOS 2501 S. State Hwy. 121 Business Suite 400 Lewisville, TX 75067</p>
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STEM Optional Practical Training (OPT) Request Form

Student Information

Name _____ GSU ID _____

GSU Email _____ Date of Birth (mm/dd/yy) _____

Phone _____ Major(s) _____

Degree level: Bachelor Master Doctorate Other _____

Non-GSU Email _____

Practical Training Information

OPT Start Date _____ OPT End Date _____

Place of Employment (Leave blank if no current employer. Submit a student OPT update form once you find employment):

Company _____

Address _____

City _____ State _____ Zip Code _____

Supervisor's Name _____ Supervisor's Phone _____

Employment Dates From _____ / _____ / _____ To _____ / _____ / _____

CPT: Yes No Full-Time **or** Part-Time From _____ / _____ / _____ To _____ / _____ / _____

OPT: Yes No Full-Time **or** Part-Time From _____ / _____ / _____ To _____ / _____ / _____

- I understand my employment must be related to my field of study.
- I am aware that my employers may contact OIS in the future to give pertinent information regarding my employment.
- I understand that it is my responsibility to update the OIS with any employer, address, and/or name changes while on OPT.

Signature _____ Date _____

OFFICE USE ONLY

OIS Advisor	Front Desk	
_____	_____	Give Student New I-20
_____	_____	Student Signs Page 1 of New I-20 and Any Dependent I-20s
_____	_____	Copy I-20 (Pages 1 & 3)
_____	_____	Give Student Original I-20 and I-765
_____	_____	Staple I-20 Copies on Top of Remaining OPT Documents and File Away

STEM Optional Practical Training (OPT) Application

Select renewal of my permission to accept employment.

This will be used as your mailing address. Enter c/o (person's name) if you will mail it to someone else. Write "APT" before your apartment number, if you live in an apartment.

Write your I-94 number here.

Select "Yes" to show you have personally applied to USCIS for an EAD card in the past.

Sign and date the form. Include your mobile phone number.

Ask your employer for their E-Verify company identification number.

Enter the correct code:
(C) (3) (C) – For STEM OPT

OMB No. 1615-0040; Expires 08/31/08

I-765, Application For Employment Authorization

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

Do not write in this block.

Remarks	Action Block	Fee Stamp
A#		
Applicant is filing under §274a.12 _____		
<input type="checkbox"/> Application Approved. Employment Authorized / Extended (<i>Circle One</i>) until _____ (Date). Subject to the following conditions: _____ (Date). Application Denied. <input type="checkbox"/> Failed to establish eligibility under 8 CFR 274a.12 (a) or (c). <input type="checkbox"/> Failed to establish economic necessity as required in 8 CFR 274a.12(c)(14), (18) and 8 CFR 214.2(f)		

I am applying for: Permission to accept employment.
 Replacement (*of lost employment authorization document*)
 Renewal of my permission to accept employment (*attach previous employment authorization document*).

1. Name (Family Name in CAPS) (First) _____ (Middle) _____	Which USCIS Office? _____	Date(s) _____
2. Other Names Used (Include Maiden Name) _____	Results (Granted or Denied - attach all documentation)	
3. Address in the United States (Number and Street) _____ (Apt. Number) _____	12. Date of Last Entry into the U.S. (mm/dd/yyyy) _____	
(Town or City) _____ (State/Country) _____ (ZIP Code) _____	13. Place of Last Entry into the U.S. _____	
4. Country of Citizenship/Nationality _____	14. Manner of Last Entry (Visitor, Student, etc.) _____	
5. Place of Birth (Town or City) _____ (State/Province) _____ (Country) _____	15. Current Immigration Status (Visitor, Student, etc.) _____	
6. Date of Birth (mm/dd/yyyy) _____	7. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	16. Go to Part 2 of the Instructions, Eligibility Categories. In the space below, place the letter and number of the category you selected from the instructions (For example, (a)(8), (c)(17)(iii), etc.).
8. Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	Eligibility under 8 CFR 274a.12 () () ()	
9. Social Security Number (Include all numbers you have ever used) (if any) _____	17. If you entered the Eligibility Category, (c)(3)(C), in item 16 above, list your degree, your employer's name as listed in E-Verify, and your employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number in the space below.	
10. Alien Registration Number (A-Number) or I-94 Number (if any) _____	Degree: _____ Employer's Name as listed in E-Verify: _____ Employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number _____	
11. Have you ever before applied for employment authorization from USCIS? <input type="checkbox"/> Yes (If yes, complete below) <input type="checkbox"/> No		

Certification
Your Certification: I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the Instructions in **Part 2** and have identified the appropriate eligibility category in **Block 16**.

Signature _____ Telephone Number _____ Date _____

Signature of person preparing form, if other than above: I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

Print Name _____ Address _____ Signature _____ Date _____

Remarks	Initial Receipt	Resubmitted	Relocated		Completed		
			Rec'd	Sent	Approved	Denied	Returned

Form I-765 (Rev. 04/08/08) N

STEM Optional Practical Training (OPT) Application

STEM Optional Practical Training (OPT) Employer Verification Form

Purpose

As per **8 C.F.R. 214.2 (f)(10)(ii)(C) (4)** an employer of an F-1 student that has been approved for a 17-month STEM extension of Optional Practical Training (OPT) must agree to report the termination or departure of an OPT student to the Designated School Official (DSO) at the student's school if the termination or departure is prior to the end of the authorized period of STEM OPT. This date can be found on the student's Form I-20 on page 3.

Reporting Requirement

To report this information to the Office of International Services (OIS) at Governors State University, send an e-mail to ois@govst.edu with a subject line of "STEM OPT Student Termination/Departure."

Provide the Following Information in Your E-Mail:

- Business/Employer Name and Address
- Your Name, Title, Address, Phone Number and E-mail Address
- OPT Student's Full Name and Date of Birth
- Date of Student's Termination or Departure

By signing below, you certify that you or your business/employer will comply with this reporting requirement and that you have made a copy of this form for your own reference.

Business / Employer Name

Name of Person Completing Form

Title

Signature of Person Completing Form

Date

Please return the completed, original form to the student. The student is required to submit this completed form in order to be eligible to apply for the STEM OPT 17-month extension.