

## OPT Reporting Form For Students on Initial 12-Month Post-Completion OPT

This form must be completed each time there is any change in your US address, phone number, or employment (please see below) and submitted to the Office of International Admission within 10 days of any change. The form can be mailed, faxed, or scanned and emailed. Please attach a copy of the front and back of your EAD card if not previously submitted. Please be advised that after 90 days of unemployment, your SEVIS record will auto-terminate and you will have 15 days to leave the U.S.

Last Name, First Name	PurplePlus ID#	
Phone #	Email	
Your Current Address (inclu	de city, state, and zip code)	
OPT EAD Starting/Ending Da	ate (attach the EAD if not already on file)	
You are reporting:		
<ul> <li>New employment:</li> </ul>		
The compa	ny's name and address	EIN Number
Job title	Start date	
Short desc	ription of how your employment relates t	o your
Supervisor	's name, phone #, and email	
	f previous employment (if applicable)	
Currently unemplo	yed:	
Comments		
Termination of employers	ployment: Date of termination	
Comments		
I certify that the information is a violation of my F-1 statu	•	nderstand that failure to provide up-to-date informat
Student Signature		