

**Post-Optional Practical Training (Post-OPT) Request Form**

In order to apply for Post-Completion OPT, the following must be met:

- have reviewed the [Part I](#) POST-OPT - Online instructions for F-1 students' video
- have registered full-time or if enrolled less than full-time (approved for part-time)
- have successfully passed the Upper Division Writing Proficiency Exam
- government sponsored students must submit an updated financial document

If you have completed the above, complete this form and submit it to the IESC, via email to [iescrequest@csun.edu](mailto:iescrequest@csun.edu) along with required OPT documents.

**STUDENT'S INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
CSUN ID: \_\_\_\_\_ SEVIS ID: \_\_\_\_\_  
U.S. Address: \_\_\_\_\_  
(Street) (Apt#) (City) (State) (Zip)  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Major: \_\_\_\_\_ Degree: \_\_\_\_\_

**POST-OPT REQUESTED DATES**

Graduating Semester: \_\_\_\_\_ (Ex. Spring/Summer/Fall) Program Completion Date: \_\_\_\_\_  
Requested Post-OPT START Date: \_\_\_\_\_ Requested Post-OPT END Date: \_\_\_\_\_

*\*You may request a start date that is any date between the day after your program completion date and 60 days after the program completion date.*

**POST-OPT ACKNOWLEDGEMENT**

I acknowledge that I have carefully reviewed the Part I and Part II Post-OPT videos and I have read and understand the requirements for Post-OPT provided by the International and Exchange Student Center (IESC) at California State University, Northridge. I also understand that I must consult with my academic advisor to ensure that I will be meeting all graduation requirements at the end of the current semester. I also understand that if I am a government sponsor student, I must submit an updated financial document and/or notify and receive approval from my government sponsor before applying for Post-OPT. I do not owe the university any money.

I will only engage in employment in my field of study as it is indicated on my I-20. I will report to IESC any changes in my U.S. address, employment information, and any periods of unemployment every six months or within 10 days of a change.

*\*In signing this form, I acknowledge the above and that I will comply with the OPT reporting requirements and will abide to the rules and regulations pertaining to my F-1 status with Practical Training authorization.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For processing times please visit: <http://www.csun.edu/international/current-students-forms>. Processing times may vary during peak times. For additional information, please contact us at (818) 677-3053.

**FOR IESC USE ONLY**

- Verified current U.S. Address
  - Same major /  changed major to: \_\_\_\_\_
  - Verified Major in PS / SEVIS / Master Roster match
  - Verified grad check filed
  - Verified unofficial transcript in PS
  - No other negative service indicators in PS
  - Student has passed the UDWPE
  - If Government Sponsor student, received and updated new Financial Information in PS & SEVIS
  - If Government Sponsor student, notify Government sponsor via email
  - Passport valid 6 months into future (expires \_\_\_\_\_ )  
    \_\_\_\_\_ needs passport renewal  
    \_\_\_\_\_ passport renewal copy received \_\_\_\_\_
  - I-20 valid (expires \_\_\_\_\_ )
  - Shorten Program in PS I-20
  - Change DSO Name on PS I-20
  - Add OPT in PS
  - Shorten Program in SEVIS (adjust SEVIS reg as needed)
  - Add OPT in SEVIS and Print I-20
  - Update Master SPRDSHT
  - Signed OPT Acknowledgment on Page #1 of POST-OPT request Form.
  - Emailed student the application deadline and to come for STEP 3.
- Other: \_\_\_\_\_

OPT Docs were reviewed by (FSA Name): \_\_\_\_\_

Date that FSA entered the OPT recommendation in SEVIS: \_\_\_\_\_