

Optional Practical Training (OPT) Address and Employer Update

Today's date: _____

Last name _____ First name _____ Date of birth _____

Preferred e-mail address _____ Phone number _____

Current U.S. residential address:

Street Apt# City State Zip Code

Current permanent foreign address:

Street Apt# City

State/Province Country Postal Code

OPT validity dates on Employment Authorization Document (EAD): _____
from (mm/dd/year) to (mm/dd/year)

Are you currently employed (check one): Yes _____ No _____ (F-1 regulations do not penalize you for being unemployed while on OPT for up to 90 days, as long as you are actively searching for employment)

Primary employer name and address:

Company name Phone number

Street City State Zip Code

Additional employer(s) name and address (if applicable, add additional pages as needed):

Company name Phone number

Street City State Zip Code

Please provide the following information (if applicable):

___ I have changed my immigration status and am no longer in F-1 status. My new status is _____; the effective date is _____ (please fax or scan applicable USCIS documentation)

___ I have made a new entry to the U.S. and am currently attending _____ in F-1 status

___ I have left the U.S. permanently on _____ and am no longer utilizing my OPT