

OPT EMPLOYMENT UPDATE FORM

DIRECTIONS: Please complete the following form to update your DSO with regard to any of the following changes:

- Name
- Address
- Email
- Employment information (attach a copy of new job offer letter).

The U.S. Department of Homeland Security requires our office to monitor the information for individuals who are currently on an approved period of Optional Practical Training (OPT). You are responsible to update your employment and some personal information via SEVIS Portal.

LAST N	IAME:				STUDENT ID#:	
FIRST N	NAME:				MIDDLE NAME:	
TCSPP	E-MAIL:			PHONE #:	LOCATION:	
DEGRE	E LEVEL:	PROGRAM:			SEVIS ID#: N	
NON-TCSPP E-MAIL:			BIRTH DATE: DAY: _	MONTH:	YEAR:	
REAS	ON FOR UPDATE:					
	Change of addre	ess	New address: _			
	Change of name *Please provide copy of new passport		New name: _			
	Change of Email Address		New Email: _			
	New employer *Please provide offer le	etter	New employer:			
	ST	ART DATE:	DAY:	MONTH:	YEAR:	
YOUR	JOB TITLE:					
EMPLO	YER ADDRESS:					
EMPLOYER'S EIN – Employer Identification Number:					SUPERVISOR'S NAME:	
SUPERVISOR'S PHONE:				SUPERVISOR'S E-MAIL:		
EXPLA	IN HOW EMPLOYMENT IS	RELATED TO YOUR	COURSE OF STUDY	(?		
	Ending employment Current employ			er:		
		END DATE:	DAY:	MONTH:	YEAR:	_
EMPLO	YER ADDRESS:					
SUPERVISOR'S NAME:				SUPERVISOR'S PHONE:		
STUDENT SIGNATURE:					DATE:	

If you will be returning to your home country or changing your status, please also fill out a Departure Verification Form.