



Western Connecticut State University

## **F-1 Optional Practical Training Recommendation Form**

### **TOP SECTION TO BE COMPLETED BY THE INTERNATIONAL STUDENT**

Name: \_\_\_\_\_ ID Number: \_\_\_\_\_  
(first) (middle) (last)

Requested OPT Beginning Date: \_\_\_\_\_ Ending date: \_\_\_\_\_ # Hrs. per week \_\_\_\_\_

Date of Previous OPT: \_\_\_\_\_ Date of Previous CPT: \_\_\_\_\_

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

TO: Academic Advisors

The student referenced above is applying for permission to engage in Optional Practical Training (OPT), an employment authorization provided by the regulations of the United States Citizenship & Immigration Services (USCIS). OPT is employment in a job related to the student's major field of study and is intended to enhance and supplement the formal classroom education. Such employment must be officially recommended by a Designated School Official, duly recognized by USCIS.

Before this authorization can be granted, we must have a statement from the student's Academic Advisor indicating the date of completion of the student's degree requirements. Please note that the date of completion is not necessarily the end of the term or the graduation date, but is the date on which all requirements for the degree have been fulfilled.

Please complete the form below and return it to the International Student Advisor so that we may process this student's request. If you have any questions, please do not hesitate to contact us at 203-837-3270.

### **THE INFORMATION BELOW MUST BE COMPLETED IN ITS ENTIRETY BY THE FACULTY ADVISOR, NOT THE INTERNATIONAL STUDENT.**

This is to certify that the above-named student will complete all requirements for

the \_\_\_\_\_ degree in the field or major of  
(Bachelor's, Master's, Ph.D., etc.)

\_\_\_\_\_ on \_\_\_\_\_  
(Month/Year)

Advisor's name & Phone # \_\_\_\_\_

Advisor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Additional Comments: \_\_\_\_\_