

Request for 17-MONTH Extension of OPT

This form is provided for your convenience. The information requested is needed to comply with US Citizenship and Immigration Services (USCIS) regulations. All of the information indicated on this form is required.

Applicant Name: _____
 (please print) first name middle name family name

B Number: _____

E-Mail _____ Phone: _____

Alternate E-Mail address: _____

Current Address:	Permanent Address in home country:
_____	_____
_____	_____
_____	_____
_____	_____

Optional Practical Training – Degree Type	Starting Date of OPT	Ending Date of OPT

Please provide a photocopy of your current EAD card showing your initial period of post-completion OPT with this application form. If you are found to be eligible for a 17-month extension of OPT, the start date of the extension will be the date following the end date of your current Employment Authorization Document (EAD). The end date of your 17-month extension of OPT will be 17 months from the extension start date. To be eligible for a 17-month extension of OPT you must be employed in a paid position, not an unpaid or volunteer position.

Please provide the following information about your current employment:

Your job title: _____

This is a paid position: _____yes _____no

Name of Employer: _____

Address of Employer: _____

_____ (include ZIP code)

Name of Supervisor: () _____

Supervisor's Telephone Number () _____

Employer's E-Verify Number _____

Please Confirm Your Most Recent Degree Level and Field of Study:
(check one)

- Bachelor's
- Master's
- PhD

Date Degree Awarded: _____
(this information is provided on your diploma and on your University transcript)

Field of Study: _____

Binghamton University is now required by federal regulation to continue to maintain your SEVIS record for the full period of Optional Practical Training, including any extension.

By signing this form below, I certify that the above information is true and correct, and that I understand and will comply with the following SEVIS requirements:

- I have reported my current name, US address and e-mail address on the front of this application form
- I will report any change to my current name or address to Binghamton University's Office of International Student and Scholar Services within ten days of the change
- I will report any changes in employment information (including periods of unemployment) to Binghamton University's Office of International Student and Scholar Services within ten days of the change
- I understand that I cannot be unemployed for more than 120 days during the entire period of my 29 months on Optional Practical Training
- I understand that I must submit the online report found on Binghamton University's Office of International Student and Scholar Services web page every six months from the date my extension period of OPT begins to verify the above information.

Your Signature

_____/_____/_____
Date

PLEASE RETURN THIS FORM TO THE OFFICE OF INTERNATIONAL STUDENT & SCHOLAR SERVICES.