

**Louisiana State University – International Services Office  
Graduate Student Application for F-1 Optional Practical Training  
(OPT) Recommendation**



**Do NOT submit this application to IS until after completing steps 1-8 (below):**

1. You have checked your most recent I-20 to verify that:

- your name is correctly listed and spelled (field #1). It should match your passport.
- the level of education matches your OPT request (field #4)
- the major field of study matches your OPT request (field #5)
- the expiration date listed is NOT prior to your actual program completion date (field #5)

***If any of the above items are not correct, you must request a change and/or correction to your I-20.***

*To do so, use the [Green Sheet Request Form](#) (and if applicable, include the [Status Extension Request Form](#) or [Change of Program Level Form](#)). Please include the Green Sheet Request Form and any other applicable forms and documentation with your OPT application. **Please write, “Attention: Student Employment Coordinator” at the top of your Green Sheet Request Form.** Any missing information or documents will result in a delay in processing. **You should allow at least 5 business days for processing.***

*All questions regarding I-20 changes in relation to your OPT application should be directed to [isoemp@lsu.edu](mailto:isoemp@lsu.edu).*

2. You have filed for graduation with the Graduate School

3. You have downloaded the most recent version of this application and the I-765 form by going to our website, [www.lsu.edu/iso](http://www.lsu.edu/iso) and referred to this website for important information about OPT deadlines.

4. You have obtained all required departmental signatures on page 3 of this application.

5. You have included your original, complete I-765 form.

6. You have included your completed OPT Student Acknowledgement Form.

7. You have included your current I-20 document (copy or original).

8. You have checked that all forms included in this application have been filled out in their entirety. Any missing information will result in delays in processing your application.

**PART I. To be completed by the F-1 international student.**

A. Name: \_\_\_\_\_ LSU ID #: 89 - \_\_\_\_\_  
(last) (first) (middle)

B. I am applying for OPT based on: **Your most recent I-20 must reflect the degree and education level of your OPT request.**

MS/MA  Ph.D. Major field of study \_\_\_\_\_  ECFVG

C. I am requesting  pre-completion OPT (must end by program completion date)  full-time  part-time  
OR  post-completion OPT, or post-coursework-completion OPT (full-time)

D. OPT authorization requested dates: Start date \_\_\_\_\_ to End date \_\_\_\_\_ (REQUIRED)

E. Date of 1<sup>st</sup> F-1 entry to US **OR** effective date on F-1 I-797 approval notice: \_\_\_/\_\_\_/\_\_\_  
(m/ dy/ yr)

F. Have you ever had full-time CPT authorization for the same education level as your OPT request?  YES  NO

If yes, for which degree: \_\_\_\_\_

List all dates of CPT authorization for same education level: \_\_\_\_\_

G. Have you ever had OPT authorization for the same program level or a higher program level as your OPT request?  YES  NO  
**If you answered "YES" to this question, please submit a copy of your previous EAD card(s) with this application**

If YES, check one:  part-time authorization  full-time authorization

For which degree(s): \_\_\_\_\_

List all dates of OPT for same education level or higher education level: \_\_\_\_\_

H. Have you ever violated your F-1 status?  YES  NO If YES, which semester(s): \_\_\_\_\_

If YES, check only one: My F-1 status was reinstated via:

mailing an application to US CIS.  exiting the US and reentering with a new SEVIS I-20.

Date of reinstatement approval: \_\_\_/\_\_\_/\_\_\_ Date of reentry: \_\_\_/\_\_\_/\_\_\_  
(m/ dy /yr) (m/ dy / yr)

I. Are you pursuing a dual degree/ double major?  YES  NO

If YES, list ALL level(s) of education you are seeking and major:

a.  MS/MA  Ph.D. Major field of study \_\_\_\_\_  ECFVG  
b.  MS/MA  Ph.D. Major field of study \_\_\_\_\_  ECFVG

J. Do you already have a job offer?  YES  NO If YES, please provide us with the following information:

Employer name: \_\_\_\_\_ Start date (if known): \_\_\_/\_\_\_/\_\_\_  
(m/ dy / yr)

Employer address: \_\_\_\_\_  
\_\_\_\_\_

**While on OPT, you are required to report any changes to your name or residential address within 10 days of your move. You are also required to report your employer name and address as well as any future changes in employment (terminations, laid-off, change of companies) within 10 days of the employment or change in employment. You should report this information by emailing [isoemp@lsu.edu](mailto:isoemp@lsu.edu).**

**If you are applying to start your OPT before your program completion date, you must continue to enroll in a full-time course load during mandatory enrollment semesters (Fall and Spring), until you complete your program. If it is your final semester (semester in which you will complete your program), you may enroll part-time. If the Summer semester is your final semester, you must enroll in at least part-time credit hours during that Summer semester.**

By signing below, you, the F-1 student, certify that all information on this application is true and correct. While on OPT, you are not authorized to register for classes in a secondary or new degree program. If you are pursuing a second degree, by signing below, you are verifying that you have informed the advisor and department head of your second degree program that you will not be able to pursue any coursework in that degree while on OPT. If you do not complete the program that this OPT application is based on by the anticipated graduation date you have listed above, you must notify the IS immediately:

\_\_\_\_\_  
F-1 student's name printed

\_\_\_\_\_  
F-1 student's signature

\_\_\_\_\_  
Date

**PART II. To be completed or verified by the major professor & department head of the degree on which this application is based.**

**To Major Professor and Department Head:** The below-named student is applying for Optional Practical Training (OPT) based on the major listed below. International Services is required to report the information below in the Immigration database, SEVIS. Complete or verify the following information to the best of your knowledge. If you have any questions regarding this section, please contact the Student Employment Coordinator at [isoemp@lsu.edu](mailto:isoemp@lsu.edu).

**INSTRUCTIONS:**

Thesis/Dissertation program graduate students must complete numbers 1 & 2 OR 1 & 3.

Non-thesis program graduate students must complete number 2 OR 3.

1. \_\_\_\_\_ has completed/ is expected to complete ALL **coursework** requirements,  
(F-1 student's name printed)

**excluding** thesis/dissertation hours, on \_\_\_\_/\_\_\_\_/\_\_\_\_ for his/her \_\_\_\_\_ in \_\_\_\_\_.  
(m / dy / yr) (MS, PhD) (Major field of study printed)

2. \_\_\_\_\_ has completed/ is expected to complete ALL **program** requirements,  
(F-1 student's name printed)

**including** thesis/dissertation hours-if applicable, on \_\_\_\_/\_\_\_\_/\_\_\_\_ for his/her \_\_\_\_\_  
(m / dy / yr) (MS/Ph.D.)

in \_\_\_\_\_. He/She will graduate \_\_\_\_\_.  
(Major field of study printed) (semester and yr)

3. *For students registering for "Degree Only" –*

\_\_\_\_\_ is expected to complete all program requirements for his/her \_\_\_\_\_  
(F-1 student's name printed) (MS, PhD)

in \_\_\_\_\_ by the "degree only" deadline for the \_\_\_\_\_ semester. He/She will not  
(Major field of study printed) (semester and yr)

enroll in any additional credit hours and will graduate \_\_\_\_\_.  
(semester and yr)

**Based on the anticipated coursework and program completion dates, this student is applying for OPT based on the above-named major/level field of study.**

**Required departmental signatures:**

1) \_\_\_\_\_  
*Department head's name (printed)*  
*(required for graduate students)*

2) \_\_\_\_\_  
*Major Professor's name (printed)*  
*(required for graduate students)*

\_\_\_\_\_  
*Department Head's signature*  
*(required for graduate students)*

\_\_\_\_\_  
*Major Professor's signature*  
*(required for graduate students)*

\_\_\_\_\_  
*Date of signature*

\_\_\_\_\_  
*Date of signature*

**FOR GRADUATE STUDENTS** - *If you are applying for post-completion OPT to start **after the completion of your degree requirements** (including defense and turning in the final draft of your thesis/dissertation) and **before the official graduation date** of the LSU semester in which you are graduating, you must submit an additional letter from your graduate advisor (of your thesis/dissertation) stating the date of your defense and the date by which you will submit a **FINAL** draft of your thesis/dissertation to the LSU Graduate School. This date will be considered the end date of your degree program, which will allow you to apply for post-completion OPT: the completion date on your I-20 will be shortened accordingly.*