## Bridgewater State University International and Student and Scholar Services <u>Optional Practical Training Request Form</u>

Please write legibly and complete all fields. Incomplete forms will result in processing delays.

STUDENT NAME:			
	LAST NAME	FIRST	NAME
BANNER ID#			
Expected date of progr	am completion/Graduation	n date:	
MAJOR: DEGREE:			
	ATES: Start date: and signed by the student		
<b>Part A:</b> I am currently e I have filed a Part-Tin	nrolled in credits. ne Request Form with ISSS	(if less than full-tir	ne).
registered in Gradua	tudents only: roject/comprehensive exam. te Culminating Experience. aduation requirements. Attac	ch letter of explanat	ion from academic advisor.
I understand that it is my	responsibility to report any	delays in graduation	on immediately to ISSS.
Student Signature:			
Part II: To be complete	ed by the student's academ	ic advisor:	
completion OPT after gr		ay be made only if	mission from USCIS. For post- the student is completing their program of blete and sign below.
•	student expected to complete ed successfully and submitte		f study (all exams finished
<ol> <li>By the completion d months in good acad</li> </ol>	ate listed above, will the stu- lemic standing?	dent have been enro	olled full-time for at least 9
	_	Yes	No
Name:		Title:	
Signature:		Date	»: