



GRADUATE SCHOOL
INTERNATIONAL GRADUATE STUDENT SERVICES

OPTIONAL PRACTICAL TRAINING APPLICATION FOR F-1 STUDENTS

Complete this sheet and return it with all of the required copies and forms. Review all instructions included before completing the forms.

Student Information – All fields are REQUIRED

Please use the Surname/Primary Name field if you only have one name. The Given Name field is to be used for all other names.

Surname: _____ Given Name: _____ VT ID: (last 4 digits) _____

SEVIS ID#: _____ VT Email: _____ Local Phone #: _____

Local Address: (address) _____ (city) _____ (state) _____ (zip code) _____

Current Enrollment (check one): Master's Thesis Master's non-Thesis (coursework only) Master's non-Thesis (Project & Report) Doctorate

Graduate Assistantship? Yes No Are you enrolled in Start of Semester Defense Exception (SSDE)? Yes No

Anticipated program completion date: (Last Date of the Semester, last day of SSDE period, or end of Graduate Assistantship contract) (MM/DD/YYYY): ___/___/___
Program completion date if you hold a Graduate Assistantship: May 15 (spring), December 24 (fall), August 15 (summer)

Dates of Proposed Practical Training: Beginning (MM/DD/YYYY): ___/___/___ Ending (MM/DD/YYYY): ___/___/___

Application Checklist: (All copies must be SINGLE sided and NO Staples)

- [I-765 form](#) (complete fillable pdf and **sign in black ink**)
 - Recommendation Letter from Department (see [sample letters](#))
 - Two color photos (see [specification](#) for details)
 - Copy of current & previous Passport ID page, any extension pages, and visa page
 - Printout of most recent [I-94 record of admission](#)
 - Copies of **ALL** I-20 Forms (Pages 1 and travel signature page. *Do not include a copy of the instructions page*)
- OPT fee (\$410.00)** – choose only one form of payment
- Credit card – use [Form G-4150](#)
 - Personal check or money order (made payable to “U.S. Department of Homeland Security”)

Certification:

By signing below, I certify that I understand it is my responsibility to mail the completed application to the appropriate USCIS office within 30 days of the date the I-20 was issued and that the USCIS office must be in receipt of the application BEFORE the end of this 30 days period. I understand that I may NOT begin my employment until I receive the approved EAD from USCIS and NOT before the start date printed on the EAD. I understand that that USCIS will mail all official correspondence to the mailing address I have provided on the I-765 form.

Signature _____ Date ___/___/___

Return form and supporting documents to:
Graduate Students – International Graduate Student Services, Graduate Life Center, 540-231-8486

Office Use Only:

SHATERM SZAHOLD SFAREGQ PWIEMPV Employment End Date ___/___/___ CPT _____ OPT _____