

REQUEST FOR REGULAR OPT

Personal Information

Name _____ UIN _____
Student E-Mail _____@odu.edu Phone _____ SEVIS ID# N _____
Current U.S. Address _____

This should be your **current residential** address. If using another address to get your EAD, put it on the I-765—not on this form.

Need a letter to request your VA Driver's License to be extended for 60 days past program end date? ☐ Yes ☐ No

Are you currently working on-campus? No Employment Graduate Assistantship Other on-campus employment

Academic Program Information

Major _____ Applied Graduation ☐ May ☐ August ☐ December Year _____

Level: ☐ Bachelors ☐ Masters ☐ Ph.D. Expiration Date of Current I-20: _____

Is your major on your I-20 correct? ☐ Yes ☐ No

PhD Students ONLY: Will your requested OPT start date be BEFORE your dissertation defense? ☐ YES ☐ NO If yes, did you speak with your immigration advisor about your OPT timeline? ☐ YES ☐ NO

Requested Dates for Your OPT EAD Card

Start Date: _____ (within 60 days of your program end date) End Date: _____

I agree to follow the policies and procedures outlined on the Regular OPT Responsibilities Form.

You may receive an email from Terra Dotta, the software our office uses. PLEASE TAKE NO ACTION.

Signature _____ Date _____

Graduate Program Director (Graduate)/ Academic Advisor (Undergraduate)

- When did or will this student complete his/her coursework? Month _____ Year _____
- Student's confirmed semester of graduation? ☐ May ☐ August ☐ December 20____ **OR** ☐ PhD ABD
- Student's major: _____

Signature _____ Date _____

Name & Title _____

Phone _____ E-Mail _____

FOR VISA USE ONLY

BANNER	TerraDotta	DMV Letter:	Yes	NA
SOAHOLD: Yes No	OPT Workshop Date: _____	Shorten Program:	Yes	NA
SHATERM: _____ (GPA)	Prior CPT/OPT: Yes No	Major Updated:	Yes	NA
SHADEGR: Yes No	I-765 Version:	New OPT Added:	Yes	
SPAIDEN: Yes NA		TD Unintegrated:	Yes	
SFAREGF: _____ #cr. Less than full-time, RLC on file:	Yes No	ODU Gmail OPT Alumni:	Yes	

Comments:

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