



# OFFICE OF INTERNATIONAL STUDENT SERVICES

## OPT REQUEST FORM

### To be completed by the **STUDENT**

Drop off or send this form to the OISS along with a copy of your completed I-765. Allow **48 hours** for your new Form I-20 recommending OPT to be ready.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

SEVIS ID \_\_\_\_\_ CWID \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

#### Request for OPT:

I wish to apply for **pre-completion** OPT.

Part time (up to 20 hours a week)

Full time (more than 20 hours a week)

Start date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

End date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

I wish to apply for **post-completion** OPT. NOTE: The start date must be within **60 days** of your program completion date, not the graduation date.

Start date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

End date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

#### Eligibility Requirements:

I have completed at least 2 full semesters of study in succession at Pepperdine University.

I have not previously been granted OPT in the same education level.

I am not enrolled in an English as a Second Language (“ESL”) program at Pepperdine University.

#### New Form I-20:

I will pick up my new Form I-20 at the OISS.

I will submit a UPS shipping label to [oiss@pepperdine.edu](mailto:oiss@pepperdine.edu) via e-ship global.

I certify that I have read the “[OPT Manual](#)” in its entirety, including sections D and E. I understand that I am responsible for preparing, filing, and tracking my application. Failure to comply with the U.S. Federal Regulations cited in the OPT Manual will result in immediate loss of my OPT and F-1 status.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### To be completed by the **Academic Advisor\***

\*For Seaver students, this is your Academic Advising Associate at OneStop.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Title \_\_\_\_\_

Program of study \_\_\_\_\_ Expected Program Completion Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
(not graduation date) Month Day Year

Signature \_\_\_\_\_ Date \_\_\_\_\_

#### For office use only:

Received by \_\_\_\_\_ Date Form I-20 was printed \_\_\_\_/\_\_\_\_/\_\_\_\_

Date \_\_\_\_\_ Date Form I-20 was picked up by the student \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Form I-20 was sent to the student \_\_\_\_/\_\_\_\_/\_\_\_\_