



Optional Practical Training (OPT)

DEFINITION:

Optional practical training (OPT) is temporary employment authorization that gives F1 students an opportunity to apply knowledge gained in the classroom to a practical work experience off campus.

OPT ELIGIBILITY:

- The student must have maintained full time student status for at least one full academic year preceding the submission of his/her OPT application.
- The student is eligible for 12 months of OPT for each change to a higher educational level. Example: Received Associates Degrees » OPT (1) year// Received Bachelor's Degree » OPT for one (1) year.
- Previously approved OPT periods within the same degree level will be deducted from the 12 months total.
- A student who uses a year or more of full-time Curricular Practical Training (CPT) is not eligible for OPT.

TYPES OF OPT:

Pre Completion OPT:

- Available part time when the school is in session, deducted from the 12 months total available at half the rate.
- Part-time only when school is in session (20 hours per week or less).
- Full time during school breaks (summer).
- Must have application approved by School Official and Homeland Security
- Employment must be in field directly related to studies.
- ***Employment cannot begin until the EAD card has been received.***

Post Completion OPT:

- Available after degree completion
- Must have completed application, been approved by School Official and Homeland Security.
- Employment must be in field directly related to studies.
- ***Employment cannot begin until the EAD card has been received.***

HOW TO APPLY

- You can apply no more than 90 days before your OPT start date but no later than 60 days after your program end date.
- You do not need a job in order to apply for OPT
- Schedule an appointment with ISS&P: 303-914-6416 or international@rrcc.edu
- Complete all necessary forms
 - OPT Request Form, signed by academic adviser or Dean (this form goes to the ISS Office, **not** USCIS)
 - I-765 Form (see sample below). You must write in blue ink, or complete and print an electronic version at <http://www.uscis.gov/files/form/i-765.pdf>. You must sign the printed version!
- 2 passport style photos (lightly write your name and I-94# on the back of both photos)
- \$380 check made payable to “Department of Homeland Security”
- Provide copies of all necessary documents:
 - Photocopy of new SEVIS OPT I-20 (provided by DSO)
 - Copies of all previous I-20’s, including those from any previous schools
 - Copy of I-94 (front and back)
 - Copy of passport ID and expiration pages and F-1 visa
 - Copy of any previous EAD cards (front and back)
- Mail your OPT packet to the USCIS within 30 days of the date printed on your new SEVIS OPT I-20, and then start searching for work in your field of study!

OBLIGATIONS TO RED ROCKS COMMUNITY COLLEGE DURING YOUR OPT

In order to maintain your OPT status, you must keep communicating with the ISS office. The ISS staff must update your information in SEVIS in order for you to maintain your status.

- You **must** inform the ISS office of the following while you are on OPT:
 1. The name and address of your employer.
 2. The date that you started working for this employer.
 3. The date that you stopped working for this employer.
 4. The name and address of any subsequent employer, start, and end dates.
 5. Your address if you move while you are on OPT.

I-765 Sample

This is a sample of the I-765. Please enter all information clearly and accurately. Use blue ink.

Department of Homeland Security
U.S. Citizenship and Immigration Services

OMB No. 1615-0040; Expires 08/31/08
**I-765, Application For
Employment Authorization**

Do not write in this block.

Remarks	Action Block	Fee Stamp
A#		
Applicant is filing under §274a.12 _____		
<input type="checkbox"/> Application Approved. Employment Authorized / Extended (<i>Circle One</i>) until _____ (Date). Subject to the following conditions: _____ (Date). <input type="checkbox"/> Application Denied. <input type="checkbox"/> Failed to establish eligibility under 8 CFR 274a.12 (a) or (c). <input type="checkbox"/> Failed to establish economic necessity as required in 8 CFR 274a.12(c)(14), (18) and 8 CFR 214.2(f)		

I am applying for:

Permission to accept employment.
 Replacement (of lost employment authorization document)
 Renewal of my permission to accept employment (attach previous employment authorization document).

1. Name (Family Name in CAPS) (First) (Middle) JONES JOHN Q

11. Have you ever before applied for employment authorization from USCIS?
 Yes (if yes, complete below) No
 Which USCIS Office? _____ Date(s) _____

2. Other Names Used (Include Maiden Name) _____

Results (Granted or Denied - attach all documentation) _____

3. Address in the United States (Number and Street) (Apt. Number) 144 W. 7th Street 42A
 (Town or City) (State/Country) (ZIP Code)
DENVER CO 80241

12. Date of Last Entry into the U.S. (mm/dd/yyyy) 01/10/2007

4. Country of Citizenship/Nationality SPAIN

13. Place of Last Entry into the U.S. New York / JFK

5. Place of Birth (Town or City) (State/Province) (Country) SEVILLE SPAIN

14. Manner of Last Entry (Visitor, Student, etc.) Student

6. Date of Birth (mm/dd/yyyy) 01/01/1980 7. Gender Male Female

15. Current Immigration Status (Visitor, Student, etc.) F-1 Student

8. Marital Status Married Single Divorced

16. Go to **Part 2** of the Instructions, Eligibility Categories. In the letter and number of the category you selected from the instructions (For example, (a)(8), (c)(17)(iii), etc.).

9. Social Security Number (Include all numbers you have ever used) (if any) N/A (or if you have a number enter)

Eligibility under 8 CFR 274a.12 (C) (3) (B) Post Completion OPT

10. Alien Registration Number (A-Number) or I-94 Number (if any) 70123456789 (C) (3) (A) PreCompletion OPT

Certification.
Your Certification: I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information that the U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the Instructions in **Part 2** and have identified the appropriate eligibility category in **Block 16**.

Signature John Jones Telephone Number (303)556-7777 Date 2/15/2008

Signature of person preparing form, if other than above: I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

Print Name _____ Address _____ Signature _____ Date _____

Remarks	Initial Receipt	Resubmitted	Relocated		Completed		
			Rec'd	Sent	Approved	Denied	Returned



Make sure your address is correct. The post office will not forward mail from USCIS

Enter your social security number. If you don't have a number, enter N/A.

Pay attention to the codes used in #16. Enter either C3B or C3A, whichever is appropriate.

