



OPT EMPLOYMENT VERIFICATION FORM

This form is required for all F-1 students on Optional Practical Training (OPT). Complete this form and attach a copy of your Employment Authorization Document (EAD) card. Submit these to the CTSB admin office (#400) or by email them above. Remember you cannot exceed total 90 days of unemployment period, then your OPT status will be cancelled.

OPT students are required to report to CTU admin office within 10 days of any change.

Student Information table with fields: Last Name, First Name, Major, SEVIS ID #: N, Birth Date, Phone, Gender (Male/Female), Email, Employment Authorization Dates (see EAD card): from MM/DD/YYYY to MM/DD/YYYY

Employer Information table with fields: Job Title, Employment Type (Full-time/Part-time), Employment Date (Start/End), Total Salary and Wage per Year, Employer / Company Name, Supervisor's Name, Employer Address, Supervisor's Phone, Supervisor's Email

How does this job relate to your major/field of study? (Include tasks and responsibilities that show you will gain applied experience that directly relates to your degree)

Three horizontal lines for providing details on job relation to major/field of study.

Above information are true and correct to the best of my knowledge, and I understand these requirements and will notify any changes accordingly.

Student Signature _____

Date _____

Employer Signature _____

Date _____