

F-1 Optional Practical Training (OPT) Employment Reporting Form

Purpose of Form: All Texas A&M University F-1 students are required to report their employment status and work address while on Optional Practical Training (OPT). U.S. federal regulations require individuals on F-1 status to report any change of employment, change of address, or loss of employment *within 10 days of the change* to the school that recommended the OPT. Your OPT reporting requirement starts from the start date on your Employment Authorization Document (EAD) card.

Due to recent federal reporting requirement changes, ISS needs additional information from students to report OPT employment to SEVIS. ISS is working on updating the electronic reporting system to accommodate these changes, but this form is intended to gather that additional information in the meantime.

This section should be completed by all F-1 students.

Student Last/Family Name: First/Given Name:

UIN:

TAMU E-mail: Non- TAMU E-mail:

EAD Start Date:

Are you Self-Employed? Yes No

I am now unemployed
If checked, last date of employment:

Employer Name: Job Title:

Employment Status: Full-time (more than 20hrs/wk) Part-time

Employment Start Date: Supervisor Name:

Supervisor Phone: Supervisor's Email:

Employers' EIN (not E-verify):

Address 1:

Address 2:

City: State: Zip:

Previous Employment End Date:

I have not been previously employed

Please explain how this position is related to your major and degree level :(less than 1000 characters)

Do you need a new I-20 printed with updated employer information? Yes No

If yes, please complete the mailing information below:

- I will personally pick it up at ISS.
- I authorize my friend to pick it up at ISS.

Name of friend

Friend's UIN (if applicable)

- Send it by regular U.S. Postal Service mail to the following address:

Street Address or P.O. Box

City: State: Zip Code:

Country:

- Send it by express mail at my expense. I will request shipment through eShipGlobal (<https://study.eshipglobal.com>)

Student Responsibility Statement

I certify that the information provided is true and accurate. I have received and reviewed the OPT regulations and understand that I am required to update ISS with any employment updates as soon as they occur & no later than 10 days after the change takes place.

Signature: _____

Date:

"State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you."