

University of Louisiana at Lafayette
Office of International Affairs
Optional Practical Training Extension

*Please complete the following information when turning in your
application for OPT Extension*

Date: _____

Name: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____

Personal Email Address: _____

SEVIS ID Number: N _____

Company Name: _____

Company Address: _____

City, State, Zip Code: _____

Checklist for OPT Extension

The following information is needed to apply for OPT Extension:

- Completed Form I-765 (Form MUST BE TYPED)
- Letter from your Employer (Original, on company letterhead) stating proof of employment and letter has to have the E-Verification Number
- Copy of SEVIS I-20AB with your OPT information documented
- Copy of your last EAD card (front and back)
- Copy of degree
- Copy of I-94 (front and back)
- Fee of \$380.00 (Payable to: Department of Homeland Security)
- Two photos (go to www.uscis.gov for instructions)

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MEMORANDUM OF AGREEMENT

Name of Student: _____

SEVIS ID Number: _____

OPT Extension Beginning Date: _____

OPT Extension Ending Date: _____

1. I am applying for an **extension** of my Optional Practical Training, and I understand that I will remain under the authorization of the University of Louisiana at Lafayette as an F-1 student.
2. I understand that I must provide the Office of International Affairs with any change in my physical address and/or employment **within 10 days** of the change. I understand that I must make a validation report to the Office of International Affairs **every six months** (within 10 business days of each six month reporting date), even if there are **NO CHANGES** in the address or employment information.
3. I must provide the information until the **end** of my **OPT EXTENSION** or a change in visa status. I understand that if I am approved for a change of visa status during my **OPT EXTENSION** (for example, from F-1 to H-1), I will fax or scan a copy of the approval to the Office of International Affairs as soon as possible with my **CURRENT address and phone number**.
4. Upon receipt of the OPT Extension, it will be my responsibility to send to the Office of International Affairs a copy of the extension immediately, along with any change in employment or physical address.

Signature: _____ Date: _____

NOTE: A student on OPT EXTENSION remains in F-1 student status until the employment authorization extension expires, or the student changes visa status. Also, any periods of unemployment must be reported to the Office of International Affairs immediately. **If you are unemployed ninety (90) days out of the initial 12 month period of the post-completion OPT or one hundred twenty (120) days out of the 29 month time frame, you are out of status.**

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Do NOT submit this OPT Extension application to OIA until completing steps 1-7 below:

1. You have checked your most recent SEVIS I-20AB to verify that:
 - Your name is correctly listed and spelled (field #1). It should match your passport.
 - The major field of study matches your OPT Extension request
2. You have downloaded the most recent version of this application packet and the I-765 form by going to our website: <http://oia.louisiana.edu>. Please refer to the OIA website for important information.
3. You have included your **original**, completed **I-765** form. The **original**, completed **I-765** form **MUST BE TYPED.**
4. You have included your **original**, completed **OPT Memorandum of Agreement Form.**
5. You have included a copy of your **current** SEVIS I-20AB document.
6. You have included the **letter** from your employer (original, on company letterhead). The original letter has to have the employer's E-verification number.
7. You have checked that all forms included in this OPT application have been filled out in their entirety. Any missing information will result in delays in processing your OPT Extension application.