## 

PERSONAL INFORMATION		
LAST/FAMILY NAME:	FIRST NAME:	
LICUENAL ADDRESS		
UCI EMAIL ADDRESS:	DATE OF BIRTH [MM/DD/YY]:	
GRADUATING QUARTER: ☐ FALL ☐ WINTER ☐ SPRING [	□ SUMMER YEAR: 20	
UCI ID NUMBER:	MAJOR:	
DEGREE PROGRAM:   BACHELORS   MASTERS   DOCTORATE		
TYPE OF OPT YOU WILL BE APPLYING FOR		
□ PRE-COMPLETION OPT: EMPLOYMENT STARTS BEFORE GRADUATION □ POST-COMPLETION OPT: EMPLOYMENT STARTS AFTER GRADUATION		
REQUESTED DATES FOR OPT	Т	
START ON [MM/DD/YY]:	END ON [MM/DD/YY]:	
TYPE OF EMPLOYMENT:     FULL-TIME   PART-TIM	E [Pre-Completion is <b>always</b> part time <i>except</i> for summer]	
TWO IDENTICAL PASSPORT PHOTOS (print name lightly with pencil/ink on back of photo)  □ TWO IDENTICAL PASSPORT BIOGRAPHICAL PAGE □ PHOTOCOPY OF PASSPORT BIOGRAPHICAL PAGE □ PHOTOCOPY OF PASSPORT BIOGRAPHICAL PAGE □ PHOTOCOPY OF STUDENT VISA □ COPIES OF ALL PRIOR FORM 1-20s; INCLUDING THOSE FROM PREVIOUS SCHOOLS □ Old Version: Copy Pages 1 and 3 □ New Version: Copy Pages 1 and 2 □ 1-94 DOCUMENT (PRINTED FROM WWW.CBP.GOV/194) □ OPT GRADUATION CONFIRMATION FORM (HTTP://WWW.IC.UCI.EDU/STUDENTS/F1CURRENT/OPT.PHP). □ OPT ONLINE TUTORIAL RECEIPT (HTTP://WWW.IC.UCI.EDU/ONLINE/OPT/INDEX.PHP)  IF APPLICABLE: □ IF YOU APPLIED AND WERE GRANTED AN EAD CARD FOR OPT IN THE PAST, INCLUDE ONE COPY OF THE EAD CARD. □ IF YOU APPLIED AND WERE STATUS TO F-1 IN THE PAST, INSIDE OF THE U.S. INCLUDE A COPY OF THE EAP CARD. □ IF YOU CHANGED YOUR STATUS TO F-1 IN THE PAST, INSIDE OF THE U.S. INCLUDE A COPY OF THE APPROVAL NOTICE AND I-94 DOCUMENT.  STEP TWO: SUBMIT APPLICATION MEET WITH AN ADVISOR DURING THE EMPLOYMENT HAND-IN SESSIONS ON TUESDAY, WEDNESDAY, OR THURSDAY FROM 9AM-11AM, OR SCHEDULE AN APPOINTMENT WITH AN ADVISOR BY CALLING THE INTERNATIONAL CENTER AT 949.824.7249.  STEP THREE: PICK-UP APPLICATION PICK UP YOUR REVIEWED OPT PACKAGE 7 BUSINESS DAYS LATER [NOT INCLUDING WEEKENDS OR HOLIDAYS], PREPARE A CHECK OR MONEY ORDER FOR \$410 PAYABLE TO "US DEPARTMENT OF HOMELAND SECURITY" OR "US DHS". THIS MUST BE INCLUDED WITH YOUR OPT APPLICATION WHEN MAILING. ADDITIONAL INFORMATION ABOUT MAILING THE OPT PACKET WILL BE GIVEN TO YOU AT THAT TIME.  I UNDERSTAND THAT WHILE I AM ON OPT, IT IS MY RESPONSIBILITY TO UPDATE THE INTERNATIONAL CENTER IMMEDIATELY OF ANY ADDRESS OR EMPLOYMENT CHANGES.  STUDENT'S SIGNATURE:  DATE:  DATE:  DATE:  DATE:  DATE:		
UCI International Center ◆ Irvine, CA 92697-5255 ◆ P: 949.824.7249 ◆ F: 949.824.3090 ◆ <u>internationalcenter@uci.edu</u> ◆ <u>www.ic.uci.edu</u>		
16 Office Has Only Date Description Additional Intelligence of the College Control of the Contro		

IC Office Use Only: Date Received: \_\_\_\_\_\_ Advisor's Initials: \_\_\_\_\_\_ Ready for Pick-Up On: \_\_\_\_\_ | Revised On 12.20.2016