

OPTIONAL PRACTICAL TRAINING

Application Guide

UofSC™

ISS



South Carolina

UNDERSTANDING OPT

Optional Practical Training

- a **benefit** for F1 visa holders.
- OPT is a **work authorization** approved by USCIS.
- It allows you to work off-campus in your field of study.

EAD Card

- Once approved by USCIS, you receive an Employment Authorization Document



South Carolina

PRE-COMPLETION OPT

What is it?

- Off-campus work authorization
- To gain some work experience in your field of study before you graduate

Important to Know:

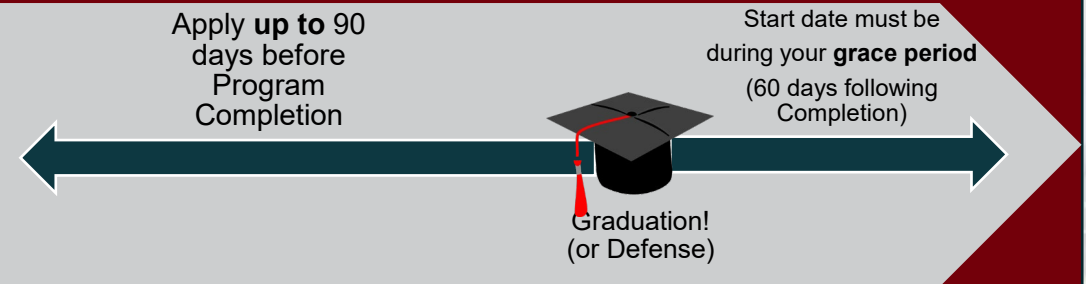
- You need a job to apply
- Time used is deducted from your 1 year of OPT eligibility
- Only part-time (< 20 hours) is allowed during the semester
- It takes approx. 90 to 120 days to be approved

POST COMPLETION OPT

What is it?

- Off-campus work authorization
- To gain some work experience in your field of study after you graduate

Important to Know:



- You must choose your start date when you apply
- It usually takes approx. 90 - 120 days for OPT to be approved!

24-MONTH STEM OPT EXTENSION

What is it?

- Continuation of off-campus work authorization
- To continue getting work experience in your field of study after your 1 year OPT
- Only for STEM fields*

*You must earn a degree in a qualifying major (list available online)

Important to Know:

- You need a job with an e-Verify employer to apply
- You and your employer need to complete a training plan (I-983)
- Employment must be paid
- Check-ins every 6 months + annual evaluations
- Apply up to 90 days before original OPT expires



South Carolina

OPT ELIGIBILITY

The following **MUST** be true at your degree level:

- ✓ You have been continuously in student status for at least 1 academic year
- ✓ You have not already used OPT for the same (or a higher) degree level
- ✓ You have not used 1 year or more of **full-time** CPT

HOW TO APPLY

1

Complete the
[OPT I-20
Request Form](#)

2

Submit the OPT
I-20 Request
Form and
(optional) I-765

3

Your ISS Advisor
will provide you
with an OPT I-20
no earlier than 90
days before your
program end date.

4

Mail your application
so it is received by
USCIS before the
end of your 60 day
grace period (or
before the end of
your OPT if you're
applying for STEM
extension)

5

Wait for your
EAD card to
arrive (approx.
90 - 120 days)



South Carolina

REQUESTING YOUR OPT I-20

- ▷ The [OPT I-20 Request Form](#) is needed in order to confirm the OPT start date that you have chosen.
- ▷ If necessary, the I-20 end date will be shortened to accommodate your graduation and/or defense date.
- ▷ Your academic advisor (note: not the ISS advisor) must complete page 2.
- ▷ You must read the entire document and sign it.
- ▷ Email the complete form to iss@sc.edu
- ▷ Processing time for receipt of an OPT I-20 from ISS is 5 business days. Please plan accordingly.

APPLICATION

- ALWAYS check the USCIS website for the most recent versions of forms and a comprehensive list of required supporting documents
- Documents required include:
 - Form I-765
 - Form G-1145
 - Copies of passport biographical page, visa page, and most recent I-94
 - 2 Passport Photos taken within the last 30 days (with name and I-94 # written on the back)
 - Check or money order for the current fee, made out to *U.S. Department of Homeland Security*
 - Form I-983 (for STEM OPT Extensions only)

I-765 INSTRUCTIONS

For complete instructions, check the [official USCIS I-765 page](#)

It is very important to include ALL pages in your application, even if you left some of them blank.

We recommend that you type your information (other than your signature) into the I-765. If you write your information, use a black ink pen and write very clearly to avoid any mistakes.

Next is a step-by-step guide to help you get started

Application For Employment Authorization		USCIS Form I-765 OMB No. 1615-0040 Expires 07/31/2022	
For USCIS Use Only	<input type="checkbox"/> Authorization/Extension Valid From _____	Fee Stamp	Action Block
	<input type="checkbox"/> Authorization/Extension Valid Through _____		
	Alien Registration Number A- [] [] [] [] [] [] [] [] [] []		
	Remarks		
To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).		<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney or Accredited Representative USCIS Online Account Number (if any) [] [] [] [] [] [] [] [] [] []
<p>▶ START HERE - Type or print in black ink. Answer all questions fully and accurately. If a question does not apply to you (for example, if you have never been married and the question asks, "Provide the name of your current spouse"), type or print "N/A" unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, "How many children do you have" or "How many times have you departed the United States"), type or print "None" unless otherwise directed.</p>			
Part 1. Reason for Applying		Other Names Used	
I am applying for (select only one box):		Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 6.	
1.a. <input type="checkbox"/> Initial permission to accept employment.		Additional Information.	
1.b. <input type="checkbox"/> Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document NOT DUE to U.S. Citizenship and Immigration Services (USCIS) error.		2.a. Family Name (Last Name) [] [] [] [] [] [] [] [] [] []	
NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to Replacement for Card Error in the What is the Filing Fee section of the Form I-765 Instructions for further details.		2.b. Given Name (First Name) [] [] [] [] [] [] [] [] [] []	
1.c. <input type="checkbox"/> Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)		2.c. Middle Name [] [] [] [] [] [] [] [] [] []	
Part 2. Information About You		3.a. Family Name (Last Name) [] [] [] [] [] [] [] [] [] []	
Your Full Legal Name		3.b. Given Name (First Name) [] [] [] [] [] [] [] [] [] []	
1.a. Family Name (Last Name) [] [] [] [] [] [] [] [] [] []		3.c. Middle Name [] [] [] [] [] [] [] [] [] []	
1.b. Given Name (First Name) [] [] [] [] [] [] [] [] [] []		4.a. Family Name (Last Name) [] [] [] [] [] [] [] [] [] []	
1.c. Middle Name [] [] [] [] [] [] [] [] [] []		4.b. Given Name (First Name) [] [] [] [] [] [] [] [] [] []	
		4.c. Middle Name [] [] [] [] [] [] [] [] [] []	
Form I-765 Edition 08/25/20		Page 1 of 7	

PAGES 1 - 2

- Part 1: Don't forget to check a reason for applying
 - 1.a. for your first OPT at this degree level
 - 1.c. for a STEM Extension
- Part 2:
 - Enter your complete name in 1. (and 2, 3, and 4 as appropriate)
 - Enter your mailing address in 5. (make sure it is easy for you to retrieve mail at that address)
 - If this address is the same as your physical address check "yes" for 6. If not, complete 7.
 - You will likely not have an A-number or USCIS Online Account Number, so you should be able to leave 8. and 9. blank.
 - Answer 10. through 13.
 - If you already have a social security number, check "no" at 14.
 - If you don't, check "yes" and complete 15. through 17.
 - Enter your country/countries of citizenship in 18.

Application For Employment Authorization		USCIS Form I-765	
Department of Homeland Security		OMB No. 1615-0040	
U.S. Citizenship and Immigration Services		Expires 07/31/2022	
For USCIS Use Only	<input type="checkbox"/> Authorization/Extension Valid From	Fee Stamp	Action Block
	<input type="checkbox"/> Authorization/Extension Valid Through		
	Alien Registration Number A- [] [] [] [] [] [] [] [] [] []		
	Remarks		
To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).		<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney or Accredited Representative USCIS Online Account Number (if any)
<p>▶ START HERE - Type or print in black ink. Answer all questions fully and accurately. If a question does not apply, if you have not been asked the question, or if the question asks, "Provide the name of your current spouse", type "None" unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, "How many times have you departed the United States?"), type or print "None" in the space provided.</p>			
Part 1. Reason for Applying		Other Names Used	
I am applying for (select only one box):		Provide all other names you have ever used, including maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Additional Information.	
1.a. <input type="checkbox"/> Initial permission to accept employment.		2.a. Family Name (Last Name) [] [] [] [] [] [] [] [] [] []	
1.b. <input type="checkbox"/> Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document NOT DUE to U.S. Citizenship and Immigration Services (USCIS) error.		2.b. Given Name (First Name) [] [] [] [] [] [] [] [] [] []	
NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to Replacement for Card Error in the What is the Filing Fee section of the Form I-765 Instructions for further details.		2.c. Middle Name [] [] [] [] [] [] [] [] [] []	
1.c. <input type="checkbox"/> Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)		2.d. Family Name (Last Name) [] [] [] [] [] [] [] [] [] []	
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		2.ch. Middle Name [] [] [] [] [] [] [] [] [] []	
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- Enter information about your birthplace/date in 19. and 20.
- Enter your most recent I-94 number (which can be retrieved [online](#)) in 21.a.
- Enter your passport information in 21.b.,d.,and e. (21.c. will likely not be applicable to you)
- In 22. and 23. enter the date you last entered the U.S. and your port of entry (the place where you went through immigration)
- Indicate your status on your last entry in 24. (likely “F1-student” unless you changed status from within the U.S.) as well as your current status in 25.”
- Enter your SEVIS number in 26 (the number starting with an N- on your I-20)
- 27. is the eligibility category:
 - (c)(3)(a) for pre-completion OPT
 - (c)(3)(b) for post-completion OPT
 - (c)(3)(c) for STEM Extension of OPT
 - If you entered (c)(3)(c) you need to complete question 28.
- The remainder of part 2 is not applicable to individuals applying for work authorization based on OPT.

Part 2. Information About You (continued)

Place of Birth

List the city/town/village, state/province, and country where you were born.

19.a. City/Town/Village of Birth

19.b. State/Province of Birth

19.c. Country of Birth

20. Date of Birth (mm/dd/yyyy)

Information About Your Last Arrival in the United States

21.a. Form I-94 Arrival-Departure Record Number (if any)

21.b. Passport Number of Your Most Recently Issued Passport

21.c. Travel Document Number (if any)

21.d. Country That Issued Your Passport or Travel Document

21.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy)

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)

23. Place of Your Last Arrival Into the United States

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

Information About Your Eligibility Category

27. Eligibility Category. Refer to the Who May File Form I-765 section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (c)(3)(a)).

28. (c)(3)(C) STEM OPT Eligibility Category. If you entered the eligibility category (c)(3)(C) in Item Number 27., provide the information requested in Item Numbers 28.a. - 28.c.

28.a. Degree

28.b. Employer's Name as Listed in E-Verify

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. (c)(26) Eligibility Category. If you entered the eligibility category (c)(26) in Item Number 27., provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.

30. (c)(8) Eligibility Category. If you entered the eligibility category (c)(8) in Item Number 27., provide the information requested in Item Numbers 30.a. - 30.g.

30.a. Have you EVER been arrested for, and/or charged with, and/or convicted of any crime in any country?

NOTE: If you answered "Yes" to Item Number 30.a., refer to Special Filing Instructions for Those With Pending Asylum Applications (c)(8) of the Form I-765 Instructions for information about providing court dispositions.

30.b. Did you enter the United States lawfully through a U.S. port of entry and were you inspected and admitted or paroled after inspection by an immigration officer? (If you answer "Yes," you MUST provide evidence of your lawful entry.)

30.c. If you answered "No" to Item Number 30.b., did you present yourself to the Secretary of Homeland Security or his or her delegate (DHS) within 48 hours of entry or attempted entry AND express an intention to seek asylum within the United States or express a fear of persecution or torture in your home country?

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• Part 3:

- If you are filling out your own form, you should check 1.a. and enter your contact information in 3., 4., 5.
- Make sure to sign with a hand-drawn signature in black ink (yes, **black** ink) in 7.a. and date in 7.b.

• Parts 4 and 5. should be left blank if you are not using an interpreter or preparer.

• Part 6:

- If you previously used CPT or OPT, you should enter your name in 1.a., b., c. and enter the following information as follow-up:
 - OPT: 3.a. "2", 3.b. "2", 3.c. "12", 3.d.: EAD card approval dates, whether it was part- or full-time, and confirm if it was approved or denied.
 - CPT: 3.a. "3", 3.b. "2", 3.c. "26", 3.d.: CPT approval dates, whether it was part- or full-time, and the name of your CPT employer.
- You may also add more information in this section if you ran out of space before or need to follow up on any other questions.

Part 2. Information About You (continued)

If you answered "Yes" to Item Number 30.e., provide the following information:

30.d. Date you presented yourself to DHS

30.e. Location where you presented yourself to DHS

30.f. Country of claimed persecution

30.g. Provide an explanation for why you did not enter the United States lawfully through a U.S. port of entry. If you need extra space to complete this item, use the space provided in **Part 6. Additional Information**.

NOTE: Refer to the **Special Filing Instructions for Those With Pending Asylum Applications** (c)(8) section of the Form I-765 Instructions for more information.

31.a. (c)(35) and (c)(36) Eligibility Category. If you entered the eligibility category (c)(35) in Item Number 27., please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in Item Number 27., please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.

31.b. If you entered the eligibility category (c)(35) or (c)(36) in Item Number 27., have you EVER been arrested for and/or convicted of any crime? ☐ Yes ☐ No

NOTE: If you answered "Yes" to Item Number 31.b., refer to **Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765** section of the Form I-765 Instructions for information about providing court dispositions.

Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

Applicant's Statement

NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.

1.a. ☐ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

1.b. ☐ The interpreter named in Part 4, read to me every question and instruction on this application and my answer to every question in a language in which I am fluent, and I understood everything.

2. ☐ At my request, the preparer named in Part 5, prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number

4. Applicant's Mobile Telephone Number (if any)

5. Applicant's Email Address (if any)

6. ☐ Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

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Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name)

1.b. Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name (if any)

Preparer's Mailing Address

3.a. Street Number

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town

3.d. State 3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

5. Preparer's Mobile Telephone Number (if any)

6. Preparer's Email Address (if any)

Preparer's Statement

7.a. ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

7.b. ☐ I am an attorney or accredited representative and my representation of the applicant in this case ☐ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained on, and submitted with, his or her application, including the Applicant's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy)

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Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and understood all of the information contained in, and submitted with, my application; and

2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understood all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

Applicant's Signature

7.a. Applicant's Signature

Date of Signature (mm/dd/yyyy)

NOTE: SMALL APPLICANTS: If you do not complete out this application, USCIS will not consider it. For more information, see the Instructions. USCIS may deny your application.

Part 4. Interpreter's Contact Information, Declaration, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1.a. Interpreter's Family Name (Last Name)

1.b. Interpreter's Given Name (First Name)

2. Interpreter's Business or Organization Name (if any)

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and which is the same language specified in Part 3, Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature

7.b. Date of Signature (mm/dd/yyyy)

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet, indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

5.a. Page Number	5.b. Part Number	5.c. Item Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
5.d.		
<input type="text"/>		

3.a. Page Number	3.b. Part Number	3.c. Item Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
3.d.		
<input type="text"/>		

4.a. Page Number	4.b. Part Number	4.c. Item Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
4.d.		
<input type="text"/>		

7.a. Page Number	7.b. Part Number	7.c. Item Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
7.d.		
<input type="text"/>		

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IMPORTANT CONSIDERATIONS

- ! Your OPT application cannot be changed after it is submitted.
- ! You must be inside the U.S. to apply for OPT.
- ! Your application **MUST** get to USCIS within 30 days of the I-20 creation, do **NOT** wait to mail your application!
- ! After you apply, you will receive a notice of action in the mail after about 2 to 4 weeks, with a case number. You will then be able to track your case online.
Please note that your case will only be updated when an action on your case is taken. This means the status likely will not change for a couple of months after USCIS receives it. There is no need to be alarmed.

YOUR RESPONSIBILITIES WHILE ON OPT

REPORTING EMPLOYMENT

You will receive a link to set up your **SEVP Portal** when your OPT starts.

Use it to report your address and employment within 10 days of any changes. It is required. Failing to do this will lead to auto-termination of your SEVIS record.

FIELD OF STUDY

All employment must be **in your field of study**. You must be able to explain the relation in the SEVP Portal.

ALLOWABLE UNEMPLOYMENT

90 days of allowable unemployment

If you use all unemployment days, you should leave the U.S. or change your visa status.

SEVIS will automatically **terminate** your record if you don't report employment in a timely manner or if you surpass 90 days of unemployment.

EMPLOYMENT REQUIREMENTS FOR POST-COMPLETION OPT

- ✓ At least 20 hours per week to count towards employment requirement
- ✓ Multiple jobs are acceptable, but all must be in your field of study
- ✓ Volunteer work is acceptable on post-completion OPT
- ✓ Contract hire and self employment are acceptable as long as paperwork is in order and you keep a time log



South Carolina

EMPLOYMENT REQUIREMENTS FOR STEM EXTENSION OPT

- ✓ At least 20 hours per week
- ✓ Multiple jobs are acceptable, but all must be related to your STEM eligible degree and all must be at least 20 hours/week
- ✓ STEM OPT Extension employment must be paid
- ✓ Your employer must be an E-Verify employer
- ✓ You must submit a Form I-983



South Carolina



INTERNATIONAL TRAVEL WITH APPROVED OPT

YOU ARE STILL IN F-1 VISA STATUS.

Necessary Documents:

- Valid F-1 Visa
- I-20 with travel signature <6 months old
- Employment Authorization Card
- Proof of Employment (Pay stub, letter from supervisor, offer letter, etc.)

TRAVEL WHILE OPT IS PENDING:

- Risky & not recommended, but is sometimes possible.
- You must have a job offer.
- If OPT is approved while you are outside of the U.S., you will need EAD card to reenter.
- Recommended: carry the guidance that states pending OPT students can be admitted to U.S.

AFTER YOUR OPT ENDS

You will have a 60-day grace period. During that time:

You will have to cease employment

You should prepare to leave the U.S.

You may change visa status

Or you can stay on F1 status and begin a new degree program if you are admitted and transfer your record appropriately



South Carolina

THANKS!

Email us at iss@sc.edu

Call us at 803 777 7461