

## **OPT EMPLOYMENT REPORTING FORM**

To maintain your F-1 visa status while on approved post-completion OPT, the Department of Homeland Security requires you report your employer information along with any address changes to the Office of International Affairs within 10 days. All employment, paid or unpaid, must be reported and directly related to your degree field. Your OPT approval and current employer information will be listed on page two of your most recent Form I-20. You are permitted no more than 90 days of unemployment during your initial post-completion OPT. This form can be found on our OPT Web Page: https://iss.ucmerced.edu/students/current/opt

SECTION A: STUDENT INFORMATION

SECTION A. STUDENT II	MEDINIMATION
First Name:	Last Name:
Street Address:	
City, State:	Zip Code:
Email Address:	Phone Number:
SECTION B: OPT INFOR	MATION
OPT Start Date (as noted on your EAD card):	OPT End Date (as noted on your EAD card):
SECTION C: EMPLOYER	INFORMATION
Employer Name:	
Worksite Street Address:	
City, State:	Zip Code:
Employment Start Date:	Previous Employment End Date  (if reporting new employer):
Briefly describe how your emplo	byment is related your degree program:
Is Employment Full-Time (20 or	more hours per week)?
I certify the information repor	rted on this form is true and correct.
Signature:	Date:

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