CERTIFICATION FOR OPTIONAL PRACTICAL TRAINING

I. STUDENT INFORMATION (To be completed by the student)

Name: ___________________________ Major/Program of Study: ___________________________

College/Department/School: ___________________________

Degree Level: □ Bachelor's □ Master's □ Doctoral

I am currently working on-campus: □ Yes* □ No
I currently have an assistantship: □ Yes* □ No

*If yes, I understand that all on-campus employment must end by the degree requirement completion date listed below

Requested OPT Start Date: ___________ End Date: ___________ Full Time/Part Time: ________

(MM/DD/YYYY) (MM/DD/YYYY)

Signature of Student: ___________________________ Date: ___________

Email (Non-Rutgers): ___________________________ RUID: ___________

II. ACADEMIC INFORMATION
(To be completed only by the academic dean or the graduate program director)

Federal regulations permit F-1 students to apply for limited periods of "Optional Practical Training" (OPT) in increments not to exceed a total of 12 months during and/or following each degree level.

Please provide information on when this student reached, or is reasonably expected to reach, the following stages of his/her academic program as noted:

• Completion of all coursework for the degree: (month/day/year) ___________
• Completion of all degree requirements (including defense, where applicable): (month/day/year) ___________
• Receipt of diploma dated (month/year) ___________

I have read and understand the above information and certify all information is accurate.

Signature ___________________________ Date ___________

HARRY CRANE ___________________________
Name

HCRANE@STAT.RUTGERS.EDU ___________________________
Email

STATISTICS ___________________________
College/Department

5-7645 ___________________________
Campus Extension

1 Last Updated Nov. 2017