

STEM OPT EXTENSION Application and Acknowledgement of Responsibilities

I understand that while I am engaged in the 24-month STEM OPT Extension period	the 24-month STEM OPT Extension period	stand that while I am engaged in	understand that while
--	--	----------------------------------	-----------------------

		·
	I am required to report to the Office of Internationa information within 10 days of the change.	I Programs (OIP) any change of address or other contact
	I am required to report any 'material changes' to my address, supervisor, duties, etc.) to OIP by submitting a	I-983 (for example, change in employer name, employer a revised I-983.
	I am required to notify OIP if my job ends by submitti that employment.	ng the Final Evaluation (bottom of page 5 of the I-983) for
	I understand that any and all employment during the S	TEM OPT period must meet <u>USCIS'</u> <u>requirements</u>
	I am required to report any new employment to OIP be employment.	y submitting a new I-983 within 10 days of beginning that
	I am required to submit a 'Data Validation' Report to 0 from the EAD start date, 12 months, 18 months and 24	OIP every 6 months during my STEM OPT period (6 months months).
	I am required to submit an annual 'Performance Evalu- page 5) and 24 months (bottom of page 5) during my S	ation' to OIP (page 5 of the I-983) at 12 months (top of ITEM OPT period.
	I understand that my F-1 status is dependent on employing the 36-month period (Post-Completion OPT + STEM Ex	byment. I cannot exceed 150 days of unemployment over tension)
	I will share the <u>Employer Reporting Obligations</u> with m	y supervisor.
First Na	ame:	Last Name:
Signatu	ıre:	Date:
Email A	Address:	Phone:



STEM OPT EXTENSION Application

(Employment Details)

Employer's Name:
Employer's EIN (Employment Identification Number):
Employer's E-Verify Number:
Worksite Address:
Supervisor Name:
Supervisor's Email and Phone Number:
Start Date with Employer:
loh Title: