

**EXTENSION APPLICATION FOR OPTIONAL PRACTICAL TRAINING (Cap-Gap or STEM)**

**Send needed documentation to Virginia Tech:**

- Copy of Current EAD card and OPT I-20 form
- Copy of completed I-765 form (only for STEM extension)
- OPT Extension application (this form)
- For cap gap extension, include copy of H1b approval or wait list notice

**Send application materials to USCIS:**

- Completed I-765
- Copy of current EAD card
- Copy of diploma or proof of graduation
- Copy of passport ID page and any extensions
- Copy of I-94 card (front and back)
- Copy of newly issued I-20 for Extension of OPT
- Copies of ALL I-20 forms, pages 1 & 3
  
- Two color photos that meet the I-765 requirements
- \$340 OPT Fee (check payable to U.S. Dept. of Homeland Security)

A new I-20 for OPT extension will be issued after above documents are submitted to Virginia Tech.

Download I-765 and instructions and complete *in blue ink* <http://www.uscis.gov/files/form/I-765.pdf>

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Student ID # \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SEVIS #: N \_\_\_\_\_ E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

Local Address in U.S.: \_\_\_\_\_

Student Job title: \_\_\_\_\_ Supervisor's name and contact information: \_\_\_\_\_

Current Employer (name and address) \_\_\_\_\_

Work Location Address: \_\_\_\_\_ Employer E-Verify Number: \_\_\_\_\_

Please give the following information about your dependents. Attach additional page if necessary.

Name (SURNAME, Given name)	Date of Birth	Country of Birth	Gender (M/F)	Relationship

I understand that my degree must be in an approved STEM field; my employer must be registered in E-VERIFY; and I must report information to the DSO every six months starting from the date the extension begins and ending when the F-1 status ends. The reporting requirement is to verify that my name and address, employer name and address, and/or loss of employment are current and accurate. The report is due to the DSO within 10 business days of each change of information. I understand that, if I am unemployed for 120 days during the OPT extension period, my eligibility for OPT terminates.

**I have read all the information regarding the extension of Optional Practical Training and reporting requirements.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return this form:** **Undergraduate students:** Cranwell International Center, 231-6527;  
**Graduate students:** International Graduate Student Services, Graduate Life Center at Donaldson Brown, Phone: 231-8486  
**National Capital Region campus:** 7054 Haycock Road, Suite 203, Falls Church, VA 22043 Phone: 703-538-3743

<b>For Office Use Only:</b> SHATERM last term enrolled _____ SZISTDN Major _____ SZA HOLD _____ GOAINTL updates _____
Beginning of OPT extension: _____ End of OPT extension: _____