

# OPT Application Supplemental Info

## ----- I-765 Form Part 6 Additional Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Student ID: \_\_\_\_\_ Current SEVIS I-20 ID #: \_\_\_\_\_

### Current SEVIS I-20 ID #:

Employment history under Current SEVIS I-20 ID #:

Have you applied for OPT(s) under current SEVIS I-20 #:  No;  Yes, OPT end month and year \_\_\_/\_\_\_/\_\_\_

Have you applied for CPT(s) under current SEVIS I-20 #:  No;  Yes

CPT 1:  Full-time;  Part-time Start Date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_

CPT 2:  Full-time;  Part-time Start Date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_

CPT 3:  Full-time;  Part-time Start Date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_

CPT 4:  Full-time;  Part-time Start Date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_

Previous SEVIS I-20 ID # if any: \_\_\_\_\_

Employment history under Previous SEVIS I-20 ID #:

Have you applied for OPT(s) under Previous SEVIS I-20 #:  No;  Yes, OPT end month and year \_\_\_/\_\_\_/\_\_\_

Have you applied for CPT(s) under Previous SEVIS I-20 #:  No;  Yes, please fill out below

CPT 1:  Full-time;  Part-time Start Date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_

CPT 2:  Full-time;  Part-time Start Date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_

Please attache more form(s) to include complete SEVIS # and Employment History