

**F-1 STUDENTS
24-month STEM OPT EXTENSION WORKSHEET**

Last name _____ First name _____

MIT ID # _____ SEVIS ID # N _____

MIT alumni/ae E-mail address _____

Alternate E-mail address _____

Your Current U.S. Telephone number _____

Your Current Residential Address in the U.S.A. _____

STEM Degree received from MIT _____

Prior STEM Degree from previous U.S. Institution _____

Validity Dates of Current OPT Employment Authorization Document (EAD Card)

Start date _____ End date _____ (Please attach copy of current EAD card)

Note: The start date of the 24-Month STEM OPT Extension is the following day after the currently approved STEM OPT end date on your current STEM OPT EAD card.

Name and Address of STEM OPT Employer _____

Name of on-site supervisor _____

Supervisor E-mail _____ Supervisor Telephone number _____

I will pick up the I-20 form at the ISO

Send the I-20 form via regular mail

Send the I-20 form via express mail

Personal check or money order payable to MIT for \$20.00 is required.

Please do not mail cash. Without the check or money order, the I-20 form will be mailed to you via regular U.S. Postal Service.

Mailing Address to which the new I-20 form should be sent:

Same as Residential Address

Other Mailing Address _____

(continued on reverse)

Requirements for Students on STEM OPT Extension

Students pursuing a period of STEM OPT Extension must **not**:

- Work in a paid position for any employer that is not an E-Verify employer
- Have more than 150 days of unemployment time during the entire period of post-completion OPT (regular post-completion OPT and STEM OPT Extension).

Students must **report to the ISO within 10 days of**:

- A change of legal name
- A change in residential or mailing address
- Changes in employer*
- Loss of employment (**within 5 business days**)

How to Report:

Please send e-mail to iso-help@mit.edu with the subject line: "STEM OPT Updates, MIT ID#".

***How to report a change of E-Verify employer during STEM OPT Extension:**

You must submit **a letter** from your new employer and **an updated and signed Form I-983**, so we can update your SEVIS record and re-issue your Form I-20 to reflect correct employer information. E-mail us the letter on company letterhead signed by your employer verifying the following:

- That the employer is enrolled in E-Verify (provide E-Verify number if possible)
- Employer's name and complete address (including zip code)
- Supervisor's name, e-mail address and telephone number
- Employment start date
- Position title and description of how the employment is directly related to your primary field of study

Please e-mail the new letter AND the updated Form I-983 to iso-help@mit.edu with the subject line: "STEM OPT, New employment, MIT ID#".

Send a Validation Report every six months starting from the date the STEM OPT Extension starts and ending when the student's F-1 status ends or the STEM OPT extension ends, whichever is first.

The Validation Report must include the student's:

- Full legal name
- SEVIS identification number
- Current mailing and residential address
- Current U.S. telephone number
- Current e-mail address
- Name and address of the current employer
- Current Position Title
- How your position relates to your field of study
- Supervisor's name, e-mail address, and telephone number
- Date you began activity with the current employer
- Number of days of unemployment

Send a Self-Evaluation Report on page 6 or 7 of the Form I-983 **every twelve months**, starting from the date the STEM OPT Extension starts and ending when the student's F-1 status ends or the STEM OPT extension ends, whichever is first.

Please e-mail the Validation Report and Self-Evaluation Report to the ISO advisor for your MIT academic program/department. You can find your ISO advisor at <http://web.mit.edu/iso/about/student-advisor.shtml>

I certify that I have read the ISO instructional webpage on 24-month STEM OPT Extension, complied with all the requirements for the 24-month STEM OPT Extension, and that I have read and understand my reporting responsibilities through out my OPT status as outlined above. I also understand that failure to comply with these requirements will result in loss of benefits and immigration status.

I understand that any employment or activity during 24-month STEM extension of Optional Practical Training must be directly related to my primary field of study.

Signature

Date