



Office of International Relations &
Global Engagement
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Optional Practical Training (OPT) Request Form

Part I: Instructions

Please complete this form if you are requesting Optional Practical Training. Please review the International Student Handbook for guidelines and policies.

Part II: Student Information

Family/Last Name: _____ First Name: _____

BHSU Student ID#: _____ Major Field of Study: _____

Education Level: Bachelor's Master's

Part III: Request & Signature

Expected Graduation Date: _____/_____/_____
Month Day Year

Requested OPT Start Date: _____/_____/_____
Month Day Year

Requested OPT End Date: _____/_____/_____
Month Day Year

Type of OPT requested: Pre-completion OPT (c)(3)(A)
 Post-completion OPT (c)(3)(B)

List all previously authorized employment (add additional information on back of page if necessary) for Practical Training (CPT or OPT):

Start Date: _____/_____/_____ End Date: _____/_____/_____
 Part-Time or Full-Time CPT or OPT

Start Date: _____/_____/_____ End Date: _____/_____/_____
 Part-Time or Full-Time CPT or OPT

Start Date: _____/_____/_____ End Date: _____/_____/_____
 Part-Time or Full-Time CPT or OPT

Student Signature: _____ Date: _____