

International Student Services Sierra Vista, 3rd Fl 1500 N Verdugo Rd Glendale, CA 91208-2894 818-240-1000 x6645 gcciso@glendale.edu

OPT Reporting Form

STUDENT INFORMATION

Last/Family Name:		First Name:	
SEVIS ID:	V" C I 20"	GCC Student ID:	
NAXXXXXX	A ; on top of 1-20		
I am reporting the following (p	lease check all that apply):		
☐ A change in my contact inf	ormation (address, phone, or er	mail). Please complete Section A .	
Unemployment, including completion of previously reported job. Please complete Section B.			
	you have not done so already. If	e at the end of page 2 if a new I-20 is needed. Submit a f you are on STEM OPT, you must submit a new <u>I-983</u>	
	Applying for STEM OPT. Submit a complete <u>I-983 training plan</u> in addition to completing <u>Section C</u> . Only students <u>eligible for STEM OPT</u> may apply.		
please complete the approp	O 1	no changes to report, please click here: Otherwise, unsure if you have changes to report, please complete ank).	
REPORTING INFOR	RMATION		
SECTION A: CHANGE I	N CONTACT INFORMA	ATION	
Address:			
(street s	number and name)	(apartment number, if applicable)	
City:	State	Postal Code:	
_			
•			
SECTION B: UNEMPLO Please select the appropriate ch			
completion OPT. I unders	tand that I have a 150-day total	e a 90 day total limit of unemployment while on post- limit of unemployment if I have been approved for ccumulated during the initial year of OPT).	
	nas ended. My last day of work v ment limits listed in the above b	was (MM/DD/YYYY): bullet.	



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SECTION C: EMPLOYMENT - Please complete ALL required sections:

Reporting Type (REQUIRED):				
☐ This is my first job on OPT (submit a copy of your	EAD card if you have not done so already).			
☐ I am applying for the STEM extension (complete all sections on this page and attach I-983 Training Plan).				
☐ I have found a new position at the new company listed below. My last day of work at my prior position was (MM/DD/YYYY): If I am on STEM OPT, I understand I need to attach a new I-983 Training Plan to this document.				
Position Information (REQUIRED):				
Job Title:				
Start Date (MM/DD/YYYY):	End date, if known (MM/DD/YYYY):			
This position is:	I am:			
☐ Full Time (21+ hours a week) ☐ Part Time (20 hours a week or less)	 □ Employed by a company □ Self-Employed (initial post completion OPT only) 			
Please provide 1-2 sentences indicating how the employery important to explain what you will be doing on the	oyment is related to your degree. <u>Please be brief but specific</u> . It is he job as part of the statement:			
Company EIN (REQUIRED for STEM OPT studen	xts):			
Company Information (REQUIRED; Supervisor info				
Name of Company (daily work site):				
Address of Company (daily work site): Street Number	& Name, Suite Number (if applicable), City, State, Zip code			
Will you be working remotely/from home: □ Yes	□ No □ Sometimes			
Supervisor Information:	Phone (XXX-XXX-XXXX) Email			
Staffing/Hiring Agency (if applicable) Name of Staffing/Hiring Agency:				
Address of Company (daily work site):				
Street Number	& Name, Suite Number (if applicable), City, State, Zip code			

I-20 Needed?

Your I-20 does **not** need to be updated when you report a new employer. However, an I-20 showing your current employer is recommended if you will be traveling outside of the US. **If you need a new I-20, check this box:** □