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Academic Adviser's Recommendation Form

NOTICE: If all required signatures are not gathered, your OPT Petition will not be processed.

This form provides the information required by the United States Department of Homeland Security for the granting of employment authorization for practical training to an F-1 international student. The student's academic adviser/faculty and department chair. Please return the completed form to the student. Any questions can be directed to the Office of International Student Programs and Services. Thank you for your assistance.

Student's Name:		LUID	
Student's Email:			
Academic Department:			
Level of Degree:	_ Field	of Study:	
Thesis Required Yes No	Thesis	s Approved on:	
Degree Completion Date:			
To the best of your knowledge, this student i	s eligibl	e and scheduled to graduate as stated above.	
Advisor's Signature	Date	Department Chair Signature	Date