

## OPTIONAL PRACTICAL TRAINING (OPT) Employment Verification Form

## FORM INFORMATION

This form provides the Office of International Education and Global Engagement with information about your OPT Employer. A DSO will update your employment information with SEVIS.

STUDENT INFORMATION	
NAME:	KU ID:
OPT EMPLOYMENT INFORMA	
JOB TITLE:	
CONFIRMED START DATE OF EN	MENT OPT:
CONFIRMED END DATE OF EMP	ENT OPT:
<b>TYPE OF OPT</b> : □ Full-time statu	than 20 hours/week.   Part-time status: 20 or less hours/week.
EMPLOYER EIN NUMBER:	
EMPLOYER NAME:	
EMPLOYER ADDRESS:	
CITY:	STATE: ZIP CODE:
SUPERVISOR NAME:	
EMAIL:	PHONE NUMBER:
PROVIDE A BRIEF DESCRIPTION	W THIS EMPLOYMENT IS RELATED TO YOUR MAJOR COURSE OF STUDY:
SIGNATURE & DATE:	