## OPT Request Information Form

Name: ____________________________________________

Date of Birth: _______________________________ I-94 No. ________________________________

Date first granted F-1 status: ______________________ (Date of first entry stamp in F1 status)

Major Field of Study: ____________________________ Major Code: _______________________

Requested OPT Start Date: ________________________ OPT End Date: _______________________

List all CPT approved during the current degree at UW and circle full or part time:

<table>
<thead>
<tr>
<th>Start</th>
<th>End</th>
<th>Part time or Full time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature of student________________________________________ Date ___________________

*****************************************************************************

To be completed by Designated School Official (DSO):

__ Is taking a full course of study at this school with expected date of completion of ________________

__ Is taking less than a full course of study in last semester ending on ______________________________

__ Completed the course of study at this school on or before ______________________________

**DSO Name and title:** ___________________________ - Coordinator, Student/Scholar Immigration

**DSO Signature**

University of Wyoming DEN214F00241000 307-766-5193

Revised 3/5/2018