

**ACADEMIC ADVISOR RECOMMENDATION - OPTIONAL PRACTICAL TRAINING**

**Student Name** \_\_\_\_\_  
Last First Middle

**Banner ID** \_\_\_\_\_ **Email** \_\_\_\_\_

**Phone** \_\_\_\_\_

What email address do you want to use for the SEVP portal \_\_\_\_\_

**Program (Major/Degree Level)** \_\_\_\_\_

**Thesis/Doctoral Dissertation Defense/Submission Date (anticipated)** \_\_\_\_\_ (Graduate Students Only)

I verify that the above-named student has completed all coursework and/or is anticipated to defend a thesis/dissertation by the above-listed date. His/her degree is expected to be awarded on

\_\_\_\_\_  
(Degree Award/Commencement Date)

**Date Student Wishes to Begin OPT** \_\_\_\_\_ (any day from graduation date up to 60 days thereafter)

\_\_\_\_\_  
**Academic Advisor's Name & Title**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Phone**

\_\_\_\_\_  
**Email**

\_\_\_\_\_  
**Department**

**Comments:**

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