Auburn University at Montgomery
Office of Global Initiatives
PO Box 244023
Montgomery, AL 36124

After (OPT) Approval

During OPT, you continue to be in F-1 status and AUM is responsible for reporting information to SEVIS in order to maintain your immigration status.

YOU are responsible for providing the following information to the Global Initiatives during OPT:

- Your current address, telephone number, email address, no later than 10 days after any changes occur.
- Proof of any change of status to a different category.
- Admission to a school to pursue another degree program. Please note: Once your SEVIS record is transferred, to the new degree program, your OPT is no longer valid. Please choose transfer dates that will not interfere with your OPT end date.
- Employer information:
  - Employer name
  - Address
  - EIN
  - Job Title
- Information should be updated no later than 10 days after any changes to employer information occur.
- Supervisor's name, telephone number and email address.
- You must also explain how your employment is related to your course of study.

***Changes to address or employer updates can be submitted using the OPT Data Form ***

After your OPT expires, you have the following options:

- Depart the U.S. within 60 days of your OPT expiration date
- Obtain admission to another degree program in the U.S within 60 days of your OPT expiration date and request your I-20 be transferred to the new program/school.
  - o You should begin the new program within five months from the OPT expiration date
- Change your status to a different nonimmigrant category

OPT Data Form

Name_____

      (Family Name)   (First Name)   (Middle Name)

Date of Birth: ____/____/____   **Gender:** _____male _____female

         mm   dd   yyyy

AUM ID#: _____   **SEVIS ID#:** _____

Student's U.S. Address:

_____

_____

_____

Telephone #: _____   **Email address:** _____

Employer's Information

Employer's Name: _____

Employer's EIN: _____

Employer's Address:

_____

_____

_____

Your Job Title: _____

Start Date: _____

Supervisor's Name_____
                          (Family Name)   (First Name)

Telephone #: _____   **Email address:** _____

This position is: _____Paid   _____ Voluntary

This position is: _____Full time   _____ Part time

Briefly explain how this job is related to your course of study: