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## **Immigration Services Office**

# **OPT REPORT FORM**

This form is designed for UMMS sponsored F-1 visa holders on Post-Completion Optional Practical Training (OPT) to report changes in employer information and local or international address while on OPT. Please remember that changes in U.S. address, international address or OPT employer must be submitted within 10 days following the change to maintain F-1 status.

### **\*DENOTES REQUIRED FIELD**

\* Passport Name: \_\_\_\_\_\_

* I am reporting (select one):	New Employment	En	nd of Employment	Change of Status	Departing U.S.	
	Other - Remarks:					
* SEVIS ID: * Today's Date:						
* Current U.S. Address (Wr departure from the U.S. if you	5	te of	* International Add	ress (Outside of the U.S.)		
* Mailing Address for UPS Delivery:		* Phone Number				
			* Non UMMS emai	1 address		

#### **Report New Employment**

Date of Hire	Hours Per Week	Job Title		
Employer Name			Employer Identification Number (EIN)	
Employer Street Address		Supervisor's First Name	Supervisor's Last Name	
		Supervisor's Email	Supervisor's Phone Number	
How is this job related	d			
to your UMMS degre (Attach additional pag if needed.)	e?			

### **Report End of Employment**

Last Day of Work	Employer Name	Job Title

### **Other Reporting & Special Instructions**

Date of Change of Status (if applicable)				
Please include additional information if you have been approved a change of status or adjustment of status. Include new				
status and receipt number for application/petition). Please forward a copy of your I-797 Approval Notice and I-94 to ISO.				