

## ACADEMIC ADVISOR'S CERTIFICATION FORM FOR OPTIONAL PRACTICAL TRAINING (OPT)

Optional Practical Training (OPT) is a type of off-campus employment authorization available to international students in F-1 immigration status. In accordance with U.S. federal regulations, ISSS is required to verify a student's eligibility before recommending them for OPT. This form provides information regarding the student's academic progress needed for this recommendation.

For undergraduates, only full-time Academic Advising staff in the appropriate college (e.g. Arts & Sciences, Kenan-Flagler Business School, School of Journalism and Media, etc.) should complete this form. For graduate students, only a student's assigned faculty advisor or the Director of Graduate Studies within the department should complete the form. For MBA and MAC students, the form should be completed by the MBA Registrar and MAC Registrar, respectively.

### STUDENT INFORMATION (COMPLETED BY STUDENT)

Name: \_\_\_\_\_ PID: \_\_\_\_\_

Academic Program/Major(s): \_\_\_\_\_

### ADVISOR'S RECOMMENDATION (COMPLETED BY ACADEMIC ADVISOR ONLY)

**Student's Degree Level:** Bachelor's      Master's      Doctorate      Other (specify): \_\_\_\_\_

**Degree Program Type:**

#### UNDERGRADUATE STUDENT/NON-THESIS GRADUATE STUDENT

The student will complete/completed enrollment for the degree in the following term (does not need additional coursework to complete the degree if they successfully complete all coursework in this term):

Spring      Summer I      Summer II      Fall

Year: \_\_\_\_\_

#### GRADUATE STUDENT WITH THESIS/DISSERTATION

- The student will complete/completed required coursework (excluding thesis/dissertation) in:

Spring      Summer I      Summer II      Fall

Year: \_\_\_\_\_

- The student will defend the thesis/dissertation on \_\_\_\_\_ (mm/dd/yyyy)

- The student's final term of enrollment in thesis/dissertation credits (993 or 994) is:

Spring      Summer I      Summer II      Fall

Year: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Campus Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_