

# OPT Employment Form

## Student Information:

Given & Family Names:	U.S. Phone Number
U.S. Home Address:	

## Employer Information:

1.

4. Start Date: \_\_\_\_\_ End Date (of previous employer- if any): \_\_\_\_\_

5. Full-Time/Part-Time:

Full-time: more than 20 hours per week

Part-time: 20 or less hours per week

6. Work Site Primary Address: \_\_\_\_\_

Secondary Address (if any): \_\_\_\_\_

7. Explain how this job is related to your course of study (degree):

## Supervisor Information:

1. Supervisor Name \_\_\_\_\_

2. Phone Number: \_\_\_\_\_ and Email: \_\_\_\_\_

## Acknowledgement Information :

To meet the requirements as an F-1 International Student at Loma Linda University (LLU), I,

\_\_\_\_\_, agree that:

Student Given and Family Names

1. I will make sure my employment information, home address, and phone number are current. I will make any changes and/or additions in my SEVP Portal account or inform International Student & Scholar Services Of BT98.0Gtl