

Post Graduation Information Update Form

While you are on post-completion F-1 Optional Practical Training (OPT) or J-1 Academic Training (AT), it is your responsibility to notify the International Student Center of any changes to your name, address, employer, or interruption of employment within 10 days of the change. If you are an F-1 student on OPT please also attach a copy of your Employment Authorization Document (EAD). **Even if no changes are made, you must report this information to the ISSS every 6 months and 12 months from the EAD start date. Failure to do so is a violation of your status and will result in SEVIS automatically terminating your record.**

Name: _____

E-mail address: _____ Phone Number: _____

SEVIS ID #: _____ OPT Dates: _____ to _____
(Located above the bar code on your I-20 or DS-2019) Month/Day/Year Month/Day/Year

I am updating the following information (check any that apply):

Name Change - Please attach a photocopy of your new passport with updated name.

Address Change

Permanent Foreign Address (Residential)

Address (line 1): _____

Address (line 2, if any): _____

City: _____

Province or Territory: _____

Postal Code: _____

Country: _____

U.S. Address (Residential)

Address (line 1): _____

Address (line 2, if any): _____

City: _____

Postal Code: _____

Employer- You must initially report your first employer and then any changes throughout your period of authorized employment.

Employer: _____

Employer Address: _____

Start Date: _____ End Date: _____

Interruption of Employment (Applicable only to F-1 students on OPT. During post-completion OPT, F-1 status is dependent upon employment. Students may not accrue an aggregate of more than 90 days of unemployment during any post-completion OPT carried out under the initial post-completion authorization. Students granted the 17 month OPT extension may not accrue an aggregate of more than 120 days of unemployment during the total OPT Period comprising any post-completion OPT carried out under the initial post-completion authorization and the subsequent 17-month extension period.)

Please check one:

I became unemployed on _____ (mm/dd/yyyy).

I have found new employment _____ (mm/dd/yyyy). My new employer information is listed above.

Signature: _____ Date: _____

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