Verification of Program Completion Date
for Doctoral/Master's (thesis programs only) students

Student Information: University ID#: _____

Name: _____   Date of Birth: ____ / ____ / _____

Major: _____

Department Coordinators: The above-named student is applying for permission to engage in off-campus employment directly related to the student's degree/major field of study, using Post-Completion Optional Practical Training (OPT). In support of this application, please complete the information below and return it to the student so ISO may process the student's request.

Please indicate the student's completion date or term in *one* of the three boxes:

Student is expected to complete degree requirements at the END of (Fall/Spring/Summer Term): _____/20____	Student has completed ALL coursework and will apply for OPT prior to completion of thesis/dissertation and will complete program during OPT period. Requested I-20 shorten date (MM/DD/YYYY): _____/_____/_____
Student is expected to complete degree requirements by this date (If earlier than the end of semester date) (MM/DD/YYYY): _____/_____/_____	

Please determine this date carefully: The I-20 program completion date should reflect the *estimated* completion of all remaining degree requirements by the student, which does not necessarily coincide with graduation or finalization of UR administrative processing. PhD students are not required to have completed their Dissertation/Thesis to apply for Post-Completion OPT.

Possible dates to consider are below:
- Date of defense
- Date corrections will be completed
- Date student upload final thesis in UR system
- Or employment start date if student has completed all degree requirements, excluding completion of thesis/dissertation.

The program completion date on the I-20 also indicates the end of for service on-campus work permission for student employment or payments through a graduate award. Students who are unable to finish all non-thesis degree requirements by the reported date are limited in using their OPT authorization and could lose their work permission entirely.

"I confirm that information provided here is true and accurate".

Department Coordinator's Name: _____   Email: _____

Signature: _____   Date: _____

ISO will accept a verified digital signature or an electronically reproduced signature on this form. An example of a "verified digital signature" is a digital signature through DocuSign or Adobe software. In contrast, a typed name in a plain text field is not a verified digital signature.