

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