

# INTERNATIONAL STUDENT & SCHOLAR SERVICES

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## STEM OPT Extension Application Form

Please submit the following documents with your OPT STEM Extension Application:

- 1-983 Training Plan for STEM OPT Students pgs. 1-5
- Form I-765
- Copy of the diploma or transcript for STEM degree
- Copies of all previous EADs issued to you, including your current OPT.
- Receipt of payment for 24 Month STEM OPT Maintenance Fee

1. Name: \_\_\_\_\_ 2. UConn ID #: \_\_\_\_\_  
3. E-Mail Address: \_\_\_\_\_ 4. Telephone Number: (\_\_\_\_) \_\_\_\_\_  
5. Address: \_\_\_\_\_

6. Do you currently have, or have you had in the past, a STEM OPT Extension? EAD dates: \_\_\_\_\_ to \_\_\_\_\_

7. Your STEM OPT application must be based on employment in a specific position with an E-Verify employer. Please report on the following information for your STEM OPT Employer:

Position/Title: \_\_\_\_\_ Employer's Name \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
Work Hours/Week: \_\_\_\_\_ Position is (circle one): paid / unpaid E-Verify Number: \_\_\_\_\_  
Employment Start Date (mm/dd/yyyy) \_\_\_\_\_ Employment End Date (mm/dd/yyyy) \_\_\_\_\_

8. Is your site of employment the same location as your employer address? \_\_\_ Yes \_\_\_ No

If no, site of employment address: \_\_\_\_\_

9. Are you employed by a staffing or temp agency? \_\_\_ Yes \_\_\_ No

*IF YES: The I-983 Form must be completed by the client supervisor, not the staffing agency.*

10. List all other employment/training positions that you have held since starting your post-completion OPT. If self-employed, list "Self-Employed" under "Employer's Name". (Please note that self-employment is not permitted during the period of STEM OPT extension):

Position/Title: \_\_\_\_\_ Employer's Name \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
Work Hours/Week: \_\_\_\_\_ Position is (circle one): paid / unpaid  
Employment Start Date (mm/dd/yyyy) \_\_\_\_\_ Employment End Date (mm/dd/yyyy) \_\_\_\_\_

Position/Title: \_\_\_\_\_ Employer's Name \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
Work Hours/Week: \_\_\_\_\_ Position is (circle one): paid / unpaid  
Employment Start Date (mm/dd/yyyy) \_\_\_\_\_ Employment End Date (mm/dd/yyyy) \_\_\_\_\_

I certify that the above information is correct and that my STEM OPT application is based on employment with an E-Verify employer and directly related to my STEM degree coursework.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date