



Intake Date: _____
Intake Initials: _____

OPT CHANGE OF ADDRESS

Today's Date: _____	
LAST NAME: _____	First Name: _____
Student ID #: L000 _____	Date of Birth: _____
E-mail: _____	Telephone #: () _____

SECTION 1) CURRENT U.S. ADDRESS – Must be where you live! NO PO BOXES accepted.

Number & Street _____ Apt. # _____

City _____ State _____ Zip Code _____

Phone #: () _____

E-mail (please print CLEARLY): _____ @ _____

SECTION 2) OPT & EMPLOYER INFORMATION –NOTE: Even unpaid work or volunteer work is still considered to be “employment,” so you can report that kind of work to OISS too!

Have you received your OPT card (EAD)? No ___ Yes ___

OPT Start Date: _____ OPT End Date: _____ OPT Receipt # WAC _____

Employer Name: _____

Number & Street: _____

City _____ State _____ Zip Code _____

Start Date of Employment at this job: _____
MM/DD/YYYY

Check here if you are unemployed: When did your previous employment end? _____
MM/DD/YYYY

OTHER: If you are leaving the U.S. or if you are applying for another visa status, please explain your situation here:

SECTION 3) STUDENT SIGNATURE

I understand that while on OPT, I am required to inform UNLV OISS of any changes to : 1) my living address, phone number, and email; 2) my employer’s name/address; and 3) my employment situation/ if I am unemployed.

Signature _____ Date _____

OFFICE USE ONLY: Date entered into FSA: _____	Initials: _____
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