



Information provided on the OPT Recommendation form is used to determine if a student is in the allowed timeframe to apply for Optional Practical Training (OPT). PLEASE NOTE: This form must be completed in full by student's academic or faculty advisor, department chair, or dean. This form **may not** be completed by the student.

Student's Name: \_\_\_\_\_

WSU ID: \_\_\_\_\_

Please tell us the semester or month/year the student is expected to complete their required coursework. For the purpose of OPT eligibility, **coursework** is defined as all non-thesis, non-project, and non-dissertation courses.

Expected Coursework Completion Date (month/year or semester): \_\_\_\_\_

Degree Title (e.g. BA, MS, PhD): \_\_\_\_\_

Academic Major: \_\_\_\_\_

**Academic Advisor Only:**

Please list any additional requirements needed to qualify for the degree award. This student still needs to complete:

- Project
- Thesis
- Dissertation
- Engineering+
- External Certification
- Other \_\_\_\_\_

The above requirement will be completed by \_\_\_\_\_  
Month/Year of completion

*I recommend this student for participation in Optional Practical Training.*

Faculty/Academic Advisor \_\_\_\_\_ Phone \_\_\_\_\_  
*Printed Name*

Faculty/Academic Advisor \_\_\_\_\_ Date \_\_\_\_\_  
*Signature*