



STEM OPT EXTENSION REPORTING FORM:

Submit this form and supporting documents (if applicable) to OPT@saonet.ucla.edu within 10 days of your reporting deadline

Name: _____ UCLA ID: _____
(Last Name, First Name)

SEVIS ID: _____ STEM OPT EAD start date: _____

To validate your SEVIS record for the 6, 12, 18 and 24-month STEM OPT Extension reporting requirements, please confirm the following:

- I have submitted copies of the front and back of my STEM OPT Extension EAD card to the Dashew Center
 - If not, submit copies of the front and back of your STEM OPT Extension EAD card in addition to this form
- My legal name, employment, U.S. address, email address, and telephone number are correct as reported in my SEVP Portal account.
 - If a change has been made to your legal name, please schedule an appointment with an F-1 Counselor.
- My employment information has not changed and is correct as reported in my SEVP Portal account.
 - If your employment has changed:
 - **Material change:**
If your supervisor, employer's address, salary/compensation, number of work hours per week, job title/description, etc. has changed, submit a new [Form I-983](#) signed by you and your employer in addition to this form.
 - **You started a new job:**
If you have changed employment, your new employment must be paid, at least 20 hours per week, directly related to your degree and appropriate for your degree level, and with an E-Verified employer.
You must submit:
 - A final self-evaluation (bottom half of page 5 of [Form I-983](#)) signed by you and your previous employer, and
 - A new [Form I-983](#) completed by you and your new employer and an employment verification letter confirming your new job title and your employer's E-Verify ID number in addition to this form.
 - **You ended your employment:**
You must submit:
 - A final self-evaluation (bottom half of page 5 of [Form I-983](#)) signed by you and your previous employer in addition to this form.

12-Month Reporting:

Submit a 12-month self-evaluation (top half of page 5 of [Form I-983](#)) signed by you and your employer in addition to this form.

24-Month Reporting:

Submit a final self-evaluation (bottom half of page 5 of [Form I-983](#)) signed by you and your employer in addition to this form.

By signing below I certify that the information reported in my SEVP Portal is truthful and accurate.

Signature: _____ Date: _____