

3141 Chestnut Street, Main Building, Suite 222 Phone: 215.895.2502: Email: ISSS@drexel.edu Office Hours: Monday – Friday, 9am – 5pm EST

OPT Employment Update Form

Student's Signature: _

OPT Employment opdate Form	
Given/First Name:	
US Phone Number:	
Current Living Address:	
OPT EMPLOYMENT REPORTING REQUIREMENTS: Ouring OPT authorization, you must report to ISSS any new employment, interruption or end of employment, change of employer name, or change of site of employment. This information must be reported within 10 days of any change. Any change in employment that results in a material change to the I-20 (i.e. employer name, employment dates, change in state/city of site of employment) will result in the issuance of an updated I-20 reflecting the update reported. Please note that your employer name will be listed on your I-20 in the same manner that you report it. Complete this form to notify ISSS of changes promptly. Email this form to isss@drexel.edu . PLEASE INDICATE THE CHANGES YOU ARE REPORTING (CHOOSE ALL THAT APPLY):	
☐ I have a new employer OR some information about my existing employment has changed:	
Company name:	
Company address:	
Hours worked per week:	
End date (if known):	
ote, from home Other (provide details below)	
Explain how this employment is related to your major; for example, describe the job responsibilities/tasks required in this position that you learned about during your coursework at Drexel (2-3 sentences):	
□ I have ended existing employment:	
End date:	
By signing and submitting this form, you are confirming the information above is current and accurate.	

Today's Date: