



Millersville University

OFFICE OF INTERNATIONAL PROGRAMS AND SERVICES

OPT EMPLOYMENT UPDATE FORM

Instructions: Read this information carefully. Failure to follow instructions may result in a delay in processing. This form is used by OPT students of Millersville University to report their employer's information, the students' local address, and any possible periods of unemployment.

Submit this form when you have secured your employer and are able to state a local address at your location of employment.

First Name, Middle Initial		Last Name	Phone	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth (mm/dd/yyyy)	Email		MU ID Number	
Major		Type <input type="checkbox"/> OPT <input type="checkbox"/> STEM-OPT	Millersville University Level <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	
Address				

EMPLOYER INFORMATION

Company Name		Dates of Employment Start: _____ End: _____	
Company Address			
Employer Identification Number (EIN)	Employment <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	Position Title	
Supervisor's Name	Supervisor's Email	Supervisor's Phone	

Explain how employment in this facility/in this position related to student's field of study:
