Tips for Completing the Training Plan STEM OPT Students (Form I-983)

Office of
International Programs
SETON HALL UNIVERSITY

Important Reminders

Before applying for the STEM OPT extension, you must first complete Form I-983 in collaboration with your employer. This step is required before you can request an updated I-20 that includes a STEM OPT recommendation from OIP. Once Form I-983 has been properly completed and reviewed, you may then submit your request for the updated I-20 to proceed with your STEM OPT application.

Note on Acceptable Signatures: Students and employers may physically sign the Form I-983 or input **their own electronic signature**. SEVP accepts electronic signatures in the following formats: Electronic signatures using software programs or applications. Students and employers may sign all signature fields on the Form I-983 using electronic signatures produced with software programs or applications. **Do not use a typing signature**

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Section 1: Student Information (Completed by Student)

SECTION 1: STUDENT INFORMATION (Completed by Student)

Student Name (Surname/Primary Name, Given Name):	Student Email Address:

Name of School Recommending STEM OPT:	Name of School Where STEM Degree Was Earned:	SEVIS School Code of School Recommending STEM OPT (including 3-digit suffix):

Designated School Official (DSO) Name and Contact Information:	Student SEVIS ID No.:	STEM OPT Requested Period (mm-dd-yyyy): From: _____ To: _____

DSO Contact Information:
Shao Chen Pan-Carr, Director
oip@shu.edu
973.761.9072

Enter your SEVIS identification (ID) number. You can your SEVIS ID At the **top of page 1** of your most recent **Form I-20**

Provide the SEVIS school code, with the three-digit suffix, for the school recommending your STEM OPT. This should be your current or most recently attended school. This can be found on your I-20.

Section 1: Student Information (Completed by Student)

Qualifying Major and Classification of Instructional Programs (CIP) Code:

Level/Type of Qualifying Degree:

Date Awarded (mm-dd-yyyy):

Based on Prior Degree? ☐ Yes ☐ No

Employment Authorization Number:

Enter your STEM major that qualifies you for the STEM OPT extension, as well as the degree's CIP code. You can find your CIP code on your FormI-20. The DHS STEM Designated Degree list can be found at https://www.ice.gov/sevis/schools

Enter the academic level of your qualifying STEM degree. (For example, enter bachelor's, master's or doctorate.)

Enter the date when the qualifying STEM degree was awarded. This date can be typically found on your official transcript.

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Section 3: Employer Information (Completed By Your Employer)

Enter the agreed-upon number of average training hours per week. To qualify for STEM-OPT, the student must work a **minimum of 20 hours per week.**

SECTION 3: EMPLOYER INFORMATION (Completed by Employer)

Employer Name:		Street Address:		Suite:

Employer Website URL:	City:	State:	ZIP Code:

Employer ID Number (EIN):	Number of Full-Time Employees in U.S.:	North American Industry Classification System (NAICS) Code:

OPT Hours Per Week (must be at least 20 hours/week):

Start Date of Employment (mm-dd-yyyy):

Compensation:

A. Salary Amount and Frequency: _____

B. Other Compensation (Type and Estimated Amount or Value):
1. _____
2. _____
3. _____
4. _____

Enter the date when the student will begin the STEM OPT training with the employer. If you are working for the same employer as during your Post-Completion OPT, use the day after your OPT EAD expires as your STEM OPT start date if you plan to continue to work for the same employer.

Section 4: Employer Certification

Note: DHS may, at its discretion, conduct a site visit of the employer to ensure that program requirements are being met, including that the employer possesses and maintains the ability and resources to provide structured and guided work-based learning experiences consistent with this Plan.

Signature of Employer Official with Signatory Authority: _____

Printed Name and Title of Employer Official with Signatory Authority: _____

Date (mm-dd-yyyy): _____ Printed Name of Employing Organization: _____

The Employer Official with Signatory Authority, who is an appropriate individual in the employer's organization who is familiar with the student's goals and performance and has signatory authority for the employer, should review the certification and affirm the statement with their signature. This does not have to be your direct supervisor.

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Section 5: Training Plan for STEM OPT Students (Completed by Student and Employer)

EMPLOYER SITE INFORMATION	
Site Name:	Site Address (Street, City, State, ZIP):
Name of Official:	Official's Title:
Official's Email:	Official's Phone Number:

Enter the employer's site name, which may be the same as the employer's name listed in Section 3. However, if the student is working for a branch or subsidiary of a large entity, or anywhere other than the employer's headquarters, provide the name of this work site.

Enter the exact address of the work site where the STEM practical training will take place. If you are working remotely, please be aware that government officials may visit your listed worksite address. Typically, if a student works remotely, the site address should where the student physically works.

Section 5: Training Plan for STEM OPT Students
(Completed by Student and Employer)

Goals and Objectives: Describe how the assignment(s) with the employer will help the student achieve his or her specific objectives for work-based learning related to his or her STEM degree. The description must both specify the student's goals regarding specific knowledge, skills, or techniques as well as the means by which they will be achieved.

You may attach an additional document describing any extra details about your goals and objectives to the end of your Form I-983 and upload it along with the form.

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Section 6: Employer Official Certification

Signature of Employer Official with Signatory Authority:

Printed Name and Title of Employer Official with Signatory Authority: _____

Date (mm-dd-yyyy): _____

The individual who signs this section may be the same official who signed the Employer Certification in Section 4, or it may be another official. An employee with signatory authority for the employer should review the certification and affirm the statement with their signature. This does not have to be your direct supervisor.

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Additional Reminders

OIP is required to keep I-983 on file for each STEM OPT student.

At the time of filing the I-765 application with USCIS, students are not expected to complete page 5 of the I-983 Training Plan. Therefore, you do not need to complete page 5. This page is for annual and final evaluations.