

## Departmental Recommendation for \

### Professional/Master's/Doctoral *Post-completion* OPT

(For Optional Practical Training to take place AFTER student's degree completion.)

**To the Recommending Department:** The information below must be provided before a student can be granted Optional Practical Training.

Office of Global  
 Engagement Utah State  
 University  
 9545 Old Main Hill  
 Logan, Utah 84322-9545  
 (435) 797-1124

Directions to student: Fill in complete all the fields below, then email the form to [rob.llewellyn@usu.edu](mailto:rob.llewellyn@usu.edu). The form will be circulated for electronic signatures via DocuSign.

Date: \_\_\_\_\_ A Number: \_\_\_\_\_

Mr./Mrs./Miss \_\_\_\_\_  
 (Student Name and E-Mail Address)

is a student in the department of \_\_\_\_\_  
 (Department)

who is expected to complete the requirements for a \_\_\_\_\_ degree on \_\_\_\_/\_\_\_\_/\_\_\_\_.  
 (Professional/Master's/Doctoral) (Date)

- Plan A Master's or Doctoral Students** may apply for OPT within 90 days of graduation and must have defended. Defense Date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- Plan B Master's Students** may apply for OPT within 90 days of graduation and must have a defense date. Defense Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.
- Plan C Master's Students (classes only to complete)** may apply for OPT at mid-term of their final semester.
- Professional Students (classes only to complete)** may apply for OPT at mid-term of their final semester.

I confirm that this student is on track to graduate on the above-mentioned date and is approved to seek practical training in her/his major as an extension of her/his academic program.

Sincerely,

\_\_\_\_\_  
 Academic Advisor or Program Coordinator Signature    Name and E-Mail Address    Phone  
**(Signature required for Plan A, B, C, Professional and Doctoral Students)**

\_\_\_\_\_  
 Major Professor Signature    Major Professor Name and E-Mail Address    Phone  
**(Signature required Plan A Master's and Doctoral Students ONLY)**

\_\_\_\_\_  
 School of Graduate Studies    Name and E-Mail Address    Phone  
 Alli Hansen- [alli.hansen@usu.edu](mailto:alli.hansen@usu.edu)    435-797-8185  
**(Signature required Plan A Master's and Doctoral Students ONLY)**