International Services Office • University of Rochester

40 Celebration Drive, Box 270446, Rochester, NY 14627 • Phone: (585) 275-2866 • Fax: (585) 276-2943 Email: questions@iso.rochester.edu • Web: www.iso.rochester.edu

Verification of Program Completion Date for Doctoral/PhD students

Student Information:	University ID#:
Name:	Date of Birth: /
Major:	
Academic Contact: The above-named student is applying employment directly related to the student's degree/major Practical Training (OPT). In support of this application, to the student so we may process the student's request:	or field of study, using Post-Completion Optional
Student is expected to complete degree requirements at the END of (Fall/Spring/Summer Term):/20	OR Student is expected to complete degree requirements by this date (If earlier than the end of semester date) (MM/DD/YYY):/
	s by the student, which does not necessarily coincide tive processing. PhD students are eligible to apply hesis. PhD students are not required to have OPT. Possible dates to consider are below:
The completion date on the I-20 also indicates the end of employment or payments through a graduate award. Strequirements by the reported date are limited in using permission entirely.	udents who are unable to finish all non-thesis degree
"I confirm that information provided here is true and	d accurate".
Department Personnel's Name:	Email:
Signature:	Date:
	nically reproduced signature on this form. An example of h DocuSign or Adobe software. In contrast, a typed name