

**F-1 OPTIONAL PRACTICAL TRAINING (OPT)
EMPLOYMENT REPORT**

Name (first and last): _____

Address (include state and ZIP code):

Current email address (not WIU email): _____

Current phone number: _____

Employer's Name: _____

Employer's Address (please list the site of employment where you will physically work):

Employer's Employment Identification Number (EIN – 9 digits): _____

Job title: _____

_____ Full Time _____ Part Time

Start date of your job: _____

Supervisor's name (first and last): _____

Supervisor's work phone number: _____

Supervisor's work email: _____

Please write 2-3 sentences how this job relates to your coursework:

Name of previous OPT employer (company), if applicable: _____

Last date worked for previous employer: _____

Please print your name

Date