

Select one of the two USCIS addresses below based on your delivery method:

For U.S. Postal Service

USCIS Dallas Lockbox

PO Box 660867

Dallas, TX 75266

or

For Express Mail or Courier Service (FedEx, UPS)

USCIS

Attn: AOS

2501 S. State Hwy. 121, Business Suite 400

Lewisville, TX 75067

Date: October 8, 2015

To whom it may concern,

I, **Your Full Name** (SEVIS ID#: **N0000123456** / I-94 No: **61234567890**) would like to apply for a **PartTime/Full-Time Pre/Post**-Completion Optional Practical Training starting from **mm/dd/yyyy** to **mm/dd/yyyy**.

Please find enclosed following documents for consideration of my request for Optional Practical Training:

1. Original Form I-765 signed and dated.
2. Completed Form G-1145
3. Photocopy of my Salve Regina University current I-20 endorsed for OPT/
4. Photocopies of all previous I-20s
I cannot locate my I-20 from X Institution. I attended X Institution from mm/dd/yyyy to mm/dd/yyyy.
5. Photocopy of my passport photo and information page, and all my U.S. visas.
6. Photocopy of my current electronic I-94 record
7. **Check or Money order** for \$410 made payable to "U.S. Department of Homeland Security." Or
8. Completed Form G-1450, Authorization for Credit Card Transactions
9. Envelope with 2 passport sized photographs, with my name and SEVIS ID number written in pencil on the back.
10. (If applicable) A photocopy of my previous EAD card.
I cannot locate my previous EAD card. I was previously on Part-Time/Full-Time Pre/Post Optional Practical Training from mm/dd/yyyy to mm/dd/yyyy.

(Note: Please include the following if you would like the completed EAD card to be sent to a friend's address of the Office of International Services)

Please send my completed EAD card to the following address:

Your Full Name

C/O Aida G. Neary or your friend's name

International Student Advisor

100 Ochre Point Avenue

Newport, RI 02840

Sincerely,

YOUR SIGNATURE

Your Full Name

Telephone:

Email: