

CSUS Computer Science – MS Optional Practical Training Application

Complete **ALL** of the information requested below and an OPT letter will be typed for you.
You will be contacted when your letter is ready.

- **DO NOT LEAVE ANY BLANKS.**
- **Write legibly.**

1. Name _____
Last First Middle Initial

2. Student ID #: _____ (List your **Sac State ID** not your SSN.).

3. Email _____

4. Phone No.: _____ / Cell Phone No.: _____

5. Native Country _____

6. Gender: _____ Male / _____ Female

NOTE: Check your gender above – do not leave blank. This information is needed to ensure that your OPT letter is typed correctly.

7. Degree Program _____

8. Graduation Date: _____ Verified By Project/Thesis Supervisor: _____
Faculty Signature

9. Student's Signature: _____ Date: _____