DEPARTMENT OF HOMELAND SECURITY U.S. Immigration and Customs Enforcement

TRAINING PLAN FOR STEM OPT STUDENTS

Science, Technology, Engineering & Mathematics (STEM) Optional Practical Training (OPT)

OMB CONTROL NO. 1653-0054 EXPIRATION DATE: 03/31/2019

SECTION 1: STUDENT INFORMATION (Completed by Student)					
Student Name (Surname/Primary Name, Given Name):		Student Email Address:			
Full name in the order shown above, exactly as					
it appears on your I-20					
Name of School Recommending STEM OPT:	Name of School Where STEM Degree Was Earned:	SEVIS School Code of School Recommending STEM OPT (including 3-digit suffix): See Form I-20			
Designated School Official (DSO) Judy Lee Office of International Student Services Pepperdine University Malibu, CA 90263-4246 310-506-4246 Judy.Lee@pepperdine.edu		Student SEVIS ID No.:	STEM OPT Requested Period: (mm-dd-yyyy) From:To:		
Qualifying Major and Classificatio	n of Instructional Programs (CIP)	_{Code:} As shown on F	Form I-20 under "major 1"		
Level/Type of Qualifying Degree:	<mark>As shown on your diplo</mark> i		_		
Date Aw arded: (mm-dd-yyyyy)	shown on your diploma				
Based on Prior Degree? Yes No 9-digit number on your EAD next to USCIS# Employment Authorization Number:					

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SECTION 5. EMPLOTER INFORMATION (Completed by Employer)				
Employer Name:	Street Address:	Suite:		
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Goals and Objectives: Describe how the assignment(s) with the employer will help the student achieve his or her specific objectives for work-based learning related to his or her STEM degree. The description must both specify the student's goals regarding specific knowledge, skills, or techniques as well as the means by which they will be achieved.

- How will your job help you achieve your learning goals?

Employer Oversight: Explain how the employer provides oversight and supervision of individuals filling positions such as that being filled by the named F-1 student. If the employer has a training program or related policy in

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AUTHORITIES: Section 101(a)(15)(F) of the Immigration and Nationality Act of 1952, as amended (INA), 8 U.S.C. 1101(a)(15)(F), Section 641 of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, Div. C, 110 Stat. 3009-546 (codified at 8 U.S.C. 1372), Section 502 of the Enhanced Border Security and Visa Entry Reform Act of 2002, Pub. L. 107-173, 116 Stat. 543 (codified at 8 U.S.C. 1762) and Homeland Security Presidential Directive No. 2 (HSPD-2), authorize U.S. Immigration and Customs Enforcement (ICE) to collect the information requested in this form.

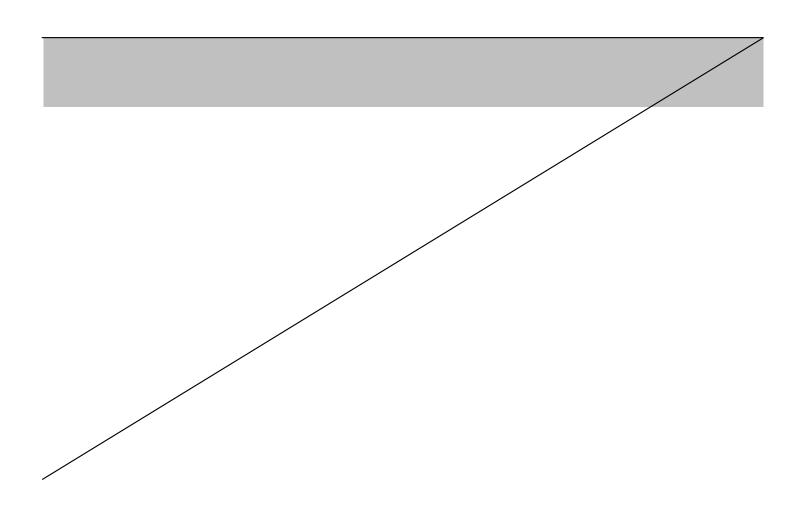
PURPOSE: The information collection on this form is used to assist in the administration of the STEM Optional Practical Training (OPT) extension so that Designated School Officials (DSO) can properly recommend the Student for and review and help coordinate his or her STEM optional practical training opportunity.

ROUTINE USES: The information

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EVALUATION ON

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