

# F-1 OPT Extension-Employment List

Student's Name: \_\_\_\_\_ SEVIS ID: \_\_\_\_\_  
Last First Middle

## LIST FROM THE MOST CURRENT EMPLOYER TO THE OLDEST:

1. Employer's Name: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Supervisor's Name and Title: \_\_\_\_\_  
Job title and description of duties: \_\_\_\_\_  
\_\_\_\_\_  
Start Date and End Date (MM/DD/YY): \_\_\_\_\_
2. Employer's Name: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Supervisor's Name and Title: \_\_\_\_\_  
Job title and description of duties: \_\_\_\_\_  
\_\_\_\_\_  
Start Date and End Date (MM/DD/YY): \_\_\_\_\_
3. Employer's Name: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Supervisor's Name and Title: \_\_\_\_\_  
Job title and description of duties: \_\_\_\_\_  
\_\_\_\_\_  
Start Date and End Date (MM/DD/YY): \_\_\_\_\_

I hereby certify that the information that I have provided is true and correct to the best of my knowledge.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

International Office  
Telephone: 323-343-43170 Facsimile: 323-343-6478  
[www.calstatela.edu/extension/internationaloffice](http://www.calstatela.edu/extension/internationaloffice)