**USC Office of International Services**

**Sample I-983 for USC Graduates**

---

**SECTION 1: STUDENT INFORMATION (Completed by Student)**

| Student Name (Surname/Primary Name, Given Name): | Tommy Trojan |
| Name of School Recommending STEM OPT: | USC |
| Name of School Where STEM Degree Was Earned: | University of Southern California |
| University of Southern California | |
| Designated School Official (DSO) Name and Contact Information: | Anna Hartwig |
| ISO Name*, 649 W 34th Street, LA, CA 90089, 213-740-2666, OPTSTEM@usc.edu | |
| Qualifying Major and Classification of Instructional Programs (CIP) Code: | Computer Science, 11.0701 |
| Level/Type of Qualifying Degree: | Master's |
| Date Awarded (mm-dd-yyyy): | 03/21/2018 |
| Based on Prior Degree? | Yes |
| Employment Authorization Number: | XXX-XXX-XXX |
| USC SEVIS Code: LOS214F00291000 |

---

**SECTION 2: TRAINING PLAN**

- **Trainee Name:** Tommy Trojan
- **Field of Science:** Computer Science
- **Program:** Master's Degree
- **Date Awarded:** 03/21/2018
- **Employment Authorization Number:** XXX-XXX-XXX
- **University:** University of Southern California
- **Designated School Official:** Anna Hartwig
- **ISO Name:** 649 W 34th Street, LA, CA 90089, 213-740-2666, OPTSTEM@usc.edu
- **Qualifying Major and Classification of Instructional Programs (CIP) Code:** Computer Science, 11.0701

**Applied on:** 03/21/2018

---

**DISCLAIMER:** This document is intended only as informational sample. All STEM OPT Extension participants and employers are responsible for verifying their I-983 Training Plan is completed in compliance with USCIS requirements (https://www.uscis.gov/working-united-states/students-and-exchange-visitors/students-and-employment/stem-opt) and DHS instructions (https://www.dhs.gov/stem-opt-hub).
**Per USCIS, the “Start Date of Employment” for your STEM OPT Extension is always the date after your 12-month post-completion OPT EAD expires. This date should match the “From” date you entered on Page 1 of the I-983.**

**See bottom of page for how to complete I-983 if you are changing employers while on the STEM OPT Extension.**

[Click for USCIS’s Study in the States for additional guidance on how to properly complete the Form I-983:](https://studyinthestates.dhs.gov/stem-opt-hub/additional-resources/form-i-983-overview)

USCIS only accepts scanned or copied wet signatures. **Typed or electronically generated signatures are not permitted.** There have been no changes to this policy due to COVID-19.

**CHANGE OF EMPLOYER:** If your STEM OPT Extension period has begun and you are requesting an I-20 due to a change of employer, enter the date you began (or will begin) working with your new company.
IMPORTANT: Please review the employer requirements and responsibilities required by USCIS at https://www.uscis.gov/working-united-states/students-and-exchange-visitors/students-and-employment/stem-opt.

STEM OPT participants must be a bona-fide employee of the employer signing the Training Plan and verify the employer that signs the Training Plan is the same entity that employs the student and provides the practical training experience.

Form I-983 Page 3 must describe how employment is directly related to major. If additional space is needed, add an addendum to the Form I-983.

Students who are working remotely must still provide employer’s site address. This may or may not match the address on Page 2. If you are working remotely, please write: “Permitted to Work Remotely: EMPLOYER ADDRESS STREET, CITY, STATE, ZIP”

Refer to DHS’s Study in the States for additional guidance on how to properly complete the Form I-983:
https://studyinthestates.dhs.gov/stem-opt-hub/additional-resources/form-i-983-overview
 USC Office of International Services
Sample I-983 for USC Graduates

**SECTION 6: EMPLOYER OFFICIAL CERTIFICATION**

I declare and affirm under penalty of perjury that the statements and information made herein are true and correct to the best of my knowledge, information and belief. I understand that the law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

**Employer Official with Signatory Authority** - I certify that:

1. I have reviewed, understand, and will follow this Training Plan for STEM OPT Students (Plan);
2. I will conduct the required periodic evaluations of the student;
3. I will adhere to all applicable regulatory provisions that govern this program (see 8 CFR Part 214.2(f)(10)(i)); and
4. I will notify the DSO regarding any material changes to or material deviations from this Plan at the earliest available opportunity, including if I believe the student is not receiving appropriate training as delineated in this Plan.

**Signature of Employer Official with Signatory Authority:**

**Printed Name and Title of Employer Official with Signatory Authority:**

**Date (mm-dd-yyyy):**

---

**PRIVACY ACT STATEMENT**


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 collected on this form may be shared with: the individuals who signed the Plan, relevant DSOs acting as liaisons with the DHS, Federal, State, local, or foreign government entities for law enforcement purposes, Members of Congress in response to requests on the Student’s behalf, or as otherwise authorized pursuant to its published Privacy Act system of records notice - Privacy Act of 1974 U.S. Immigration and Customs Enforcement, DHS/ICE-001 Student and Exchange Visitor Information System (SEVIS) System of Records (https://www.dhs.gov/system-records-notices-sons).

DISCLOSURE: The information you provide is voluntary. However, failure to provide the information requested on this form may delay or prevent participation in a STEM OPT opportunity.

---

**PAPERWORK REDUCTION ACT**

The public reporting burden for this collection of information is estimated to average 7.5 hours per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid Office of Management and Budget (OMB) control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, send them to: U.S. Immigration and Customs Enforcement, Office of Policy, 500 12th Street SW, Washington, D.C. 20536

*See evaluation forms that follow for student’s first evaluation, to occur before the one year anniversary of the start date of the student’s STEM OPT employment authorization, and final program evaluation.

---

ICE Form I-983 (7/16) Page 4 of 5

Revised 6/29/2021
**CHANGE OF EMPLOYER:** If your STEM OPT Extension period has begun and you are requesting an I-20 due to a change of employer, you must complete and submit a final evaluation for your previous employer, regardless of when your STEM OPT Extension began.