Verification of Pending Program Completion

Student Information – To be completed by the student

The student is responsible for completing this information and coordinating with his/her academic advisor to complete the academic information below.

Student Name:	
Student University ID Number:	
Name & Title of Academic Advisor:	
Academic Department:	
Degree Level and Major:	

<u>On-campus Employment & OPT</u>

On-campus work authorization ends the last day of final exams for the semester the student completes coursework or the student's thesis/dissertation submission date – whichever is the final requirement for graduation. After this date, students cannot work until they have an approved OPT application, EAD card in hand, and a valid OPT start date. It is your responsibility to ask your OIA immigration advisor any questions about your completion date.

I understand that I must stop all on-campus employment once my Program End Date on my I-20 has been reached and can only continue working if the above conditions are met.

Student Signature: _____   Date: _____

Academic Information – To be completed by Academic Advisor

Please confirm the student information above and complete the following fields:

Has the student satisfied the English Language Proficiency Requirement for your degree?	O Yes	O No

Please check the most accurate option for this student:
If you have any questions, please email iadvisor@iupui.edu

O Student is an undergraduate or a graduate on a non-thesis/dissertation option and will complete all degree requirements on/by: *This should be the actual date of the final requirement, not the date of graduation/degree conferral*	_____ *Final Semester/Term & Year*
O Student is on a non-thesis/dissertation option and must pass a final comprehensive exam on/by: *This should be the actual date of the final requirement, not the date of graduation/degree conferral*	_____ *MM/DD/YYYY*
O Student is on a thesis/dissertation option. If checked, please answer the following:	
Student will complete all coursework requirements on/by: *This is only for core requirement courses, not necessarily thesis research courses*	_____ *MM/DD/YYYY*
Deposit Date on/by: *Date of final submission following the defense and editing period*	_____ *MM/DD/YYYY*

Advisor Signature: _____

Date: _____