

TO BE COMPLETED BY  
VISITING PROGRAM  
PARTICIPANT

## Statement of Acknowledgement for STEM OPT Extension Requests

**INSTRUCTIONS:** Complete this form if you are currently working at NIH as an F-1 student and you are requesting information about NIH for your Optional Practical Training (OPT) extension under the F-1 STEM regulations. You must read, complete, and sign Section I and have your NIH lab/branch supervisor or sponsor read and sign Section II below. For questions on STEM eligibility for an OPT extension, please contact the Designated School Official (DSO)/International Student Advisor at your school.

### I. F-1 STUDENT CONFIRMATION

I agree to notify the Division of International Services (DIS), NIH, and my NIH supervisor or sponsor of any intention to resign or end my NIH fellowship or assignment prior to the end date listed on my STEM OPT Employment Authorization Document (EAD). I agree to provide this notification at least **two (2) weeks in advance** of my anticipated departure date.

As per the F-1 STEM regulations, I understand that I must notify the DSO at my school of my departure date or change in employment location within 10 days. I also understand that I must notify the DSO, at the earliest available opportunity, of any material changes to or deviations from the I-983 Training Plan for STEM OPT Students. I acknowledge that NIH has the responsibility to notify the DSO within five (5) days. I am providing contact information for my DSO below to facilitate this notification.

I also agree to provide DIS with a copy of my completed and signed initial I-983 and any updated I-983s that result from any material changes to or deviations from the original Training Plan.

F-1 Student Name: \_\_\_\_\_

F-1 Student Signature: \_\_\_\_\_

Date (Month/Day/Year): \_\_\_\_\_

DSO Name: \_\_\_\_\_

School Name: \_\_\_\_\_

DSO Email: \_\_\_\_\_

DSO Telephone: \_\_\_\_\_

DSO Fax: \_\_\_\_\_

### II. NIH LAB/BRANCH SUPERVISOR OR SPONSOR CONFIRMATION

As per the F-1 STEM regulations, NIH must notify the DSO listed in Section I within five (5) days of any early departure of the F-1 student. Therefore, I agree to notify the Division of International Services (DIS), NIH, of the F-1 student's intention to resign or end the fellowship or assignment early\*.

I agree to provide this notification at least **two (2) weeks in advance** of the anticipated departure date. In addition, I will also notify DIS immediately if the F-1 student fails to report to the lab/branch for **five (5)** consecutive business days.

Lab Sponsor Name: \_\_\_\_\_

Lab Sponsor Signature: \_\_\_\_\_

Date (Month/Day/Year): \_\_\_\_\_

*\*If the NIH lab/branch is considering forced termination, the lab/branch must follow the "NIH Guidelines for the Early Termination of Awards to Postdoctoral Fellows" (<http://sourcebook.od.nih.gov/prof-desig/early-term.htm>) and **immediately** notify DIS. If forced termination is approved, DIS is still responsible for notifying the individual's school within five (5) days of the forced termination date.*

#### **HAND-CARRY, FAX, MAIL, or EMAIL this form to DIS:**

Building 31, Room B2B07  
31 Center Drive MSC 2028  
Bethesda, MD 20892-2028  
Telephone: (301) 496-6166  
FAX: (301) 496-0847

**DIS@mail.nih.gov**

*You can mail or fax the form to DIS. Please do not do both. If you fax the form, a fax cover sheet is not necessary.*

**Keep copies of everything you send to DIS**