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		Required fields are marked with an asterisk (*).		
*Visa type: 🖭				
1. *Family Name:	Student	-		
2. First Name:	Test			
3. Middle Name:		-		
4. Suffix:				
5. Date of Birth:	12/25/1979 (MM/OD/YYYY)			
6. *Gender:	FEMALE			
7. Country of Birth:	ARGENTINA	×		
8. Country of Citizenship:	ARGENTINA	×		
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Reporting burden for this collection of information is e ATTN: School Certification Branch, 500 12th ST. S.W., V	stimated to average 30 minutes per response. If Vashington, DC 20598-5600 ; OMB No.: 1653-003	you have comments regarding the accuracy of this estimate, or suggestions for simplifying this information collecti 8. DD NOT MAIL COMPLETED FORMS TO THIS ADDRESS.	on send them to: SEVP MS 5600, DHS/ICE,	
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Data entry screens for an F-1 Student SEVIS Record

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	Student , Test		
		Required fields are marked with an asterisk (*).	
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	Address		
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	15. * Education Level:	BACHELOR'S	
		If Other, enter here:	
	16. * Primary Major Code:	51.3818 Nursing Practice Select	
	17. * Secondary Major Code:	00.0000 None Select	No Secondary Major
	18. * Ninor Code:	00.0000 None Select	No Minor
	19. * Normal Length of Study:	24 (Months)	
	20. * Program Start Date:	11/07/2010 (MM/DD/YYYY)	
	21. * Program End Date:	11/07/2012 [MM/DD/YYYY]	
	22. * English Proficiency:		
	Is English proficiency required by the school? Yes 💌		
		If Yes, does the student have the required English proficiency? The Part of the student have the required English proficiency.	
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Data entry of personal and program information

Financial information screen for student and dependent (an F-2) if applicable (Funds must equal or exceed expense amount entered.)

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Student , Test	Required fields are marked with an asterisk ($^{\ast}).$	
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Total expenses: \$19,000.01)	
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F-2 dependent information entry screen

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			Student Information	
			SEVIS ID:	
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			Country of Bith: ARGENTINA Country of Citizenship: ARGENTINA	
			Gender: FEMALE	
			School Name: Alexander Institute - Alexander Campus Program Start Oate: 11/07/2010	
			Program End Date: 11/07/2012	
			Visa Type: F-1 Status: DRAFT	
			Required fields are marked with an asterisk (*).	
	1.* Family name:	Student		
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Steps above produce an F-1 Student SEVIS Record in Initial status.

Student arrives at school. The designated school official enters registration information.

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	Required fields are marked with an asterisk (*).	
	SEVIS 10: N000128738	
	Family Name: Student	
	First liame: Test	
	Date of Birth: 12/25/1979 Country of Birth: ARGENTINA	
	Country of Otizanship: ARGENTINA	
	Gender: FEMALE	
	School liame: Alexander Institute - Alexander Campus Program Statt Date: 11/07/2010	
	Program End Date: 11/07/2012	
	Visa Type: F-1	
	Status: INITIAL	
1. Current Session End Date:	12/20/2010 (MM/DD/YYYY)	
2. * Next Session Start Date:	01/04/2011 (MM/0D/YYYY)	
🗍 The student is in the las	session of his/her program. If checked, do not enter Next Session Start Date.	
3. U.S. Address:		
Commuter Student	If checked, U.S. address is not required.	
* Address 1:	student US address	
Address 2:		
* City:	US oby	
* State:	VIRGINIA Y 22222 + 5333	
* Zip Code:	2222 • <u>3333</u>	
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* Country:	ARGENTINA	
Postal Code:		
5. Passport Number:		
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8. Visa Number:		
9. Post/Country of Visa Issuance:		
10. Visa Expiration Date:	(MN/DD/YYY)	
11. Admission Number:		
12. Port of Entry:	2	
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14. Remarks:	2	
	Update Information Reset Values Cancel	
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Registration includes current session, next session start date, and U.S. address.

This is an Active Student SEVIS Record.

Designated school official clicks on the Optional Practical Training (OPT) link located on left-side navigation to complete an OPT employment request.



OPT Employment request screen

SEVIS Eligibility - Employment List - Windows Internet Explorer provided by ICE-DHS-	SIG (v7.0-ICEO1)	<u>. 6 x</u>
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	OPT Employment	
	SEVIS ID: N0000128738 Camily Hamas Endest	
	Family Name: Student First Name: Test	
	Date of Birth: 12/25/1979	
	Country of Birth: ARGENTINA Country of Citizenship: ARGENTINA	
	Gender: FEMALE	
	School Name: Alexander Institute - Alexander Campus Program Start Date: 11/07/2010	
	Program End Date: 11/07/2012	
	Visa Type: F-1	
	Status: ACTIVE	
	No employment data found for student	
Prior to recommending Optional Practical Training (OPT), you must ensure that the training of amemployment) and changes in his/ her address. The school must continue to maintain re- beer a memoled and the sections relevant to OPT are available at tww.ice.gov/ sevis (the SEV	complex with the rules governing OPT. You must also ensure that the student is aware of his/her obligation to report cords on the student for the full period of OPT. The details of these rules can be found in the Code of Federal Regulatio IP Web stell.	changes in employment information (to include periods nr, Title 8, Sections 214.2(f)(10) to (f)(13). The CFR has
New OPT Employment		
	Return Print 1-20	
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Add OPT Employment information to an F-1 Student SEVIS Record

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A	lexander Institute			
		Add OPT Employment		
		Required fields are marked with an asterisk (*).		
	1. * Pre-completion/Post-completion OPT:	PRE-COMPLETION		
	2. * Employment Start Date:	01/15/2011 (MN/DD/YYYY)		
	3. * Employment End Date:	13:27/2011 (MN/DD/YYYY)		
	4. * Full Time/Part Time:	PART TURE X		
	5. Employer Name: 6. Employer Address:			
	Address 1: Address 2: City: State: Zip Code:	X		
	7. Explain how the employment is related to course work:	A A A A A A A A A A A A A A A A A A A		
	8. * Has the student met the 1 full academic year requirement?	Yes V		
	9. Employment Remarks: (This text will print on page 3 of the Form 1-20.)	×		
	10. Student Remarks: (This text will print on page 1 of the Form 1-20.)	×		
		Add Employment Reset Values Cancel		
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View OPT Employment information

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of unemployment) and changes in his/her address. T been anended and the sections relevant to OPT are a <u>New OPT Employment</u>	he school must continue to maintain records on available at www.ice.gov/sevis (the SEVP Web Full Time / Part	i the student for the full period site).	of OPT. The details of thes	e rules can be found in the (Code of Federal Regulations, Title 8, Sect	loyment information (to include periods ions 214.2(f)(10) to (f)(13). The CFR has	
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F-1student SEVIS Record Information Screen Notice OPT request and dependent information links.

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		SEVIS ID: N0000128738			Status: ACTIVE		
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Program		Date of Birth: 12/25/1979			School Code: WAS214F1943200		
relian		Country of Citizenship: ARGENTINA			Campus Name: Alexander Campus		
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		U.S. Address: student US address US city			Minor: 00.0000 - None rogram Start Date: 11/07/2010		
dents		VIRGINIA			Program End Date: 11/07/2012		
		2020			al Length of Study: 24		
al Information		Driver's License Number: Driver's License Issuing State:		Current	Session End Date: 12/20/2010		
al Information		oners ocerae issuing state.			Session Start Date: 01/04/2011		
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					English Proficiency: Yes Required Because:		
History				English is not	Remarks:		
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nployment		Number of Months: 09 Tuition Fees: \$15,000.00			Passport Number: Visa Number:		
zation		Living Expenses: \$2,000.00			Visa Issue Date:		
mpus		Dependent Expenses: \$2,000.00			Visa Issue Post:		
ment		Other Costs:			Port of Entry:		
equest		Other Costs Comment:			Date of Entry:		
tions:		Total Expenses: \$19,000.00			idmission Number:		
st Change to m Dates		Student's Personal Funds: \$20,000.00 Funds From This School:			Port of Departure: Date of Departure:		
1111111		Funds From This School: School Fund Type:			oave of pepartore:		
st Change to & Request		Funds From Other Sources:		1.00	1 SEVIS Fee Payment Informatio	1	
		Source Type:			Transaction Type:		
st Change to It Status		On-Campus Employment:			Transaction Date:		
		Total Funding: \$20,000.00		Tr	ansaction Amount:		
				Fee Payment/Cancelatio	n Receipt Number:		
	Dependents:						
	Sevis ID	Family Name	First Name	Relationship	Gender	Status	
	N0000128739	Student	dependent	SPOUSE	MALE	ACTIVE	
	Student Requests:						
	Request Type OPT		Request Status REQUESTED		Receipt Number		

To extend an F-1 student's OPT Employment see link in bottom right. (STEM extension)

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Topaz School		01	PT Emplo	vment					
		14 16 a.V	SEVIS ID: NOO	ŝ					
		Fa	mily Name: AA	0.000.000.000					
			First Name: Ada						
			ate of Birth: 05/	All of the second second					
			try of Birth: MA Citizenship: MA						
		Country of	Gender: MA						
		Sc	hool Name: Top		th Campus				
		Program	Start Date: 01/	19/2010					
		Program	n End Date: 01/	19/2014					
			Visa Type: F-1						
			Status: ACI	TVE					
Prior to recommending Optional the student is aware of his/her o address. The school must continu Regulations, Title 8, Sections 214 SEVP Web site).	bligation to report c ue to maintain record	hanges in emp is on the stude	loyment inform ent for the full p	ation (to includ eriod of OPT, T	e periods of une he details of the	employment) and c se rules can be fou	hanges in his/her nd in the Code of Fe	deral	
New OPT Employment									
Employee Name	Full Time / Part Time	Start Date	End Date	Request Status	Receipt Number	Command			
Employer Name HP	FULL TIME	11/02/2010	12/01/2012	APPROVED	Number	<u>View</u> Edit E	utand		
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Extend OPT Employment (STEM extension)

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Top	oaz School								
			Fyte	nd OPT Empl	ovment				
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mast subje on th	ers, or doctorate degre ct to the requirements e student for the full pe	month extension for Op e. The STEM Designated found in the Code of Fer eriod of the extension. Tl mended and the sections	Degree Prog deral Regulati he details of t	ram List is available at ons, Title 8, Sections 2 hese rules can be foun	www.ice.gov/sevis 14.2(f)(10) to (f)(1 d in the Code of Fer	(the SEVP Wel 3). Your school deral Regulation	o site). Thes must contin 15, Title 8, S	e students are also nue to maintain record:	
		P	Required fiel	lds are marked with	ı an asterisk (*).				
	Pre-completion/Post-		POST-0	COMPLETION					
	Employment Start Dat			2012 (MM/DD/YYYY)					
3.	Employment End Date	d	20	2014 (MM/DD/YYYY)					
4.	* Employer Name:		HP						
5.	Employer Address:								
		* Address 1: 100 Wa	all Street						
		Address 2:							
		* City: Washin	aata						
		1. Mariana	- Alexandre	-					
		* State: DISTR		ABIA 🔽					
		* Zip Code: 31169	•						
6.	Employment Remarks	: page 3 of the Form I-20			*				
	(This text will print on	page 5 of the Form 1-20	.,						
			<u>_</u>		<u></u>				
7.	Student Remarks:				Ā				
	(This text will print on	page 1 of the Form I-20	.)		-				
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nd OPT employment (STEM extension)

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Message Boa	rd <u>Change Password</u>		et Plug-Ins
		Current Request/Authorization Details	
		Student Information	
		SEVIS ID: N0004649132	
		Family Name: AAronno	
		First Name: Adam	
		Country of Birth: MAURITIUS	
		Date of Birth: 05/05/1970 Country of Citizenship: MAURITIUS	
		Country or Clazenship: MACKI LUS Gender: MALE	
		School Name: Topaz School	
		Program Start Date: 01/19/2010	
		Program End Date: 11/01/2010	
		Visa Type: F-1	
		Status: ACTIVE	
	OPT Employment: Employer name: Address: Start Date: End Date: Full Time/Part Time: Request Status: Receipt Number: Employment Remarks: Relevance Text: Employer name:	HP 100 Wall Street, Washingotn, DC, 31169 11/02/2010 12/01/2012 FULL TIME APPROVED Testing SCR 15605 New zip codes HP	
	Address: Start Date: End Date: Full Time/Part Time:	100 Wall Street, Washingotn, DC, 31169 12/02/2012 05/02/2014	
	Request Status: Receipt Number:	APPROVED	
	Employment Remarks: Relevance Text:	OPT Extended employment remark	
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		No Current CPT Employment	
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Data entry screen for an M-1 Student SEVIS Record

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Alexand	der Institute							
		Re	quired fields are marked with an a	sterisk (*).				
*Visa type:	M-1 💌							
1. "Fai	amily Name:	M Record						
	st Name:	Primary						
	idle Name:							
4. Suff	fix: ate of Birth:							
	ate of pirtin: ender:	07/25/1975 (MM/DD/YYYY)						
	ender: puntry of Birth:	MALE T						
	ountry of Citizenship:	BAHAMAS, THE	<u> </u>					
	isue Reason:	Janners III.						
0	Initial Attendance							
0	Initial Attendance - Change of Status Requested							
			Save Draft Reset Values	liert				
			Public Reporting Burden					
Reporting bur	rden for this collection of information is estimated to	average 30 minutes per response. If you h	ave comments regarding the accuracy	of this estimate, or suggestions for simplifying	this information collection send th	em to: SEVP MS :	600, DHS/ICE,	
ATIN: School	Certification Branch, 500 12th ST. S.W., Washington,	DC 20598-5600 ; OMB No.: 1653-0038. DO	NOT MALL COMPLETED FORMS TO THIS	AUUKESS.				
			11/04/2010 (Thursday)					
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Data entry of personal and program information for M-1

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Alexander Institute			
M Record , Primary			
	Required fields are marked with an asterisk (*		
10. Admission Number:			
11. Driver's License Number:			
12. Driver's License Issue State:	Y		
13. * Foreign Address:	· <u> </u>		
	Address 1: Foreign Address		
	Address 2:		
	City: Foreign City		
Dm	ice/Territory:		
	Postal Code:		
14. U.S. Address:	Country: BAHAMAS, THE		
	nuter Student 🦷 If checked, U.S. address is not required.		
	Address 1:		
	Address 2:		
	City:		
	State:		
	Zip Code:		
15. * Education Level:			
	If Other, enter here:		
16. * Primary Major Code:	49.0102 Airline/Commercial/Professional Pilot and Flight Crew	Select	
17. Secondary Major Code:	not available for M-1 student		
18. Minor Code:	not available for M-1 student		
19. * Normal Length of Study:	24 (Months)		
20. * Program Start Date:	12/01/2010 (MM/DD/YYYY)		
21. * Program End Date:	12/01/2011 (MM/DD/YYYY)		
22. * English Proficiency:			
Is English proficiency required by the school?			
	If Yes, does the student have the required English proficiency? Yes 💌		
	If No, explain why the school does not require English proficiency.		
	Save Draft Prev Reset Values Next Print Dra	100	
	Save Draft Prev Reset Values Next Print Dra		

Financial information screen for M-1 and dependent (an M-2) if applicable

SEVIS Eligibility - Windows Internet Explorer provided by ICE-DHS-SIG (v7.0-ICEO1)	<u>.8</u>
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Alexander Institute	
M Record , Primary Required fields are marked with an asterisk (').	
23. 4 Number of Moths in Academic Term: 03 💌	
24. Expenses	
"Tutton and Ress: \$ 15000	
"Lining Expenses: \$ 5000	
Expenses for dependents \$	
Other costs: \$	
Specify other costs: Total expenses: \$0.00	
Iotal regenesis 30.00	
"Student's personal funds: \$1400	
Funds from this school: \$	
School fund types	
Funds from other sources: \$	
Other source type: Total funding: \$0.00	
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(Funds must equal or exceed expense amount entered.)

M-2 dependent information entry screen

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US. Immigration and Customs	_	Student & Exchange Visitor Information System	SEV
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a <u>qe Board</u> <u>Change Password</u>			<u>Get Plug</u>
M Record, Primary			
School:Alexander Institute			
		Student Information	
		SEVIS ID:	
		Family Name: M Record First Name: Primary	
		Date of Birth: 07/25/1975	
		Country of Birth: BAHAMAS, THE	
		Country of Otizenship: BAHAMAS, THE Gender: MALE	
		School Name: Alexander Institute - Alexander Campus	
		Program Start Date: 12/01/2010	
		Program End Date: 12/01/2011 Visa Type: M-1	
		Status: DRAFT	
		Required fields are marked with an asterisk (*).	
1.* Family name:	M Record		
2. First name:	Dependent		
3. Hiddle name:			
4. Suffix:	×		
5. ⁴ Date of birth:	06/25/1974 (MM/DD/YYYY)		
6.* Country of birth:	BAHAMAS, THE	2	
7. Country of citizenship:	BAHAMAS, THE		
8.º Gender:	FEMALE		
9.º Relationship:	SPOUSE		
10. Remarks:		2	
		Reset Values Add Dependent Cancel	
		11(82/2010 (75	
		11104/2010 (Thursday)	
			😜 Internet 🔍 100

Screen requires affirmation of compliance with Federal Aviation Administration Flight School regulation. Designated school official must check the Yes box.

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W Infiguration ICE	Student & Exchange Visitor Information System	SEVIS
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c	Confirm Compliance	
As a flight school, or other flight-training provider, it is your responsibility to ensure compliance with current Fedd Secu	leral Aviation Administration and Department of Justice Flight School and Training Center Requirements Under the Aviation and Transportation urity Act (Public Law No: 107-71).	
	[] Үез	
	Continue	
	(MANA Paula)	
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<u>aqe Board Change Passwo</u>	nd		Stud	lent Informa	tion			<u>Get F</u>
15:			Stud					
Student			Repri	int I-20 Print D	aft 1-20			
Attendance		Personal Information				Program Informat	on	
ation		SEVIS ID: N0000128741				Status: INITIA	L	
nate Student		Family Name: M Record				Termination Reason:		
		First Name: Primary				Visa Type: N-1		
ndents		Country of Birth: BAHAMAS, THE				School Name: Alexan		
tial Information		Date of Birth: 07/25/1975				School Code: WAS21		
		Country of Citizenship: BAHAMAS, THE				Campus Name: Alexan		_
onal Information		Gender: MALE				I-20 Issue Reason: INITIA		
am Information		Foreign Address: Foreign Address Foreign City				Education Level: FLIGHT		Dilat and FileLt
		BAHAMAS, THE				Major: 49.010. Crew	2 - Airline/Commercial/Professional	Pliot and Flight
History		U.S. Address:				Secondary Major:		
		Driver's License Number:				Minor:		
est/Authorization 2		Driver's License Issuing State:				Program Start Date: 12/01/	2010	
						Program End Date: 12/01/	2011	
ections: est Change to						Normal Length of Study: 24		
am Dates						Current Session End Date:		
est Change to						Next Session Start Date:		
int Status						Requires English Proficiency: Yes		
						dent Has English Proficiency: Yes Ish Is Not Required Because:		
					ciigi	Remarks:		
		Financial Information				Travel Informatio		
		Number of Nonths: 09				Passport Number:		
		Tuition Fees: \$15,000.00				Visa Number:		
		Living Expenses: \$5,000.00				Visa Issue Date:		
		Dependent Expenses: \$3,000.00				Visa Issue Post:		
		Other Costs:				Port of Entry:		
		Other Costs Comment:				Date of Entry:		
		Total Expenses: \$23,000.00				I-94/Admission Number:		
		Student's Personal Funds: \$24,000.00				Port of Departure:		
		Funds From This School:				Date of Departure:		
		School Fund Type:						
		Funds From Other Sources:				I-901 SEVIS Fee Payment I	nformation	
		Source Type:				Transaction Type:		
		On-Campus Employment: Total Funding: \$24,000.00				Transaction Date:		
		total running; \$24,000.00				Transaction Amount:		
					Fee Payment/	Cancelation Receipt Number:		
	Dependents:							
		Family Name	First Name		Relationship	Gender	Status	
	Sevis ID							

Steps above produce this M-1 Student SEVIS Record in Initial status.

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	regionation	
	Required fields are marked with an asterisk ($^{\prime\prime}$).	
	SEVIS ID: W000128741	
	Family liame: M Record	
	First Name: Primary Date of Birth: 07/25/1975	
	Country of Birthin BAHAMAS, THE	
	Country of Citizenship: BAHAMAS, THE	
	Gender MALE	
	School Name: Alexander Institute - Alexander Campus Program Start Date: 12/01/2010	
	Program End Date: 12/01/2011	
	Visa Type: M-1	
	Status: ACTIVE	
1. *Current Session End Date:	12/20/2010 (MM/DD/YYYY)	
2. * Next Session Start Date:	01/03/2011 (MM/DD/YYYY)	
The student is in the last set	ssion of his/her program. If checked, do not enter Next Session Start Date.	
3. U.S. Address:		
Commuter Student	If checked, U.S. address is not required.	
* Address 1:	US Adress	
Address 2:		
* City:	US City	
State:	WASHINGTON Y	
* Zip Code: 4. Foreign Address:	20011 -	
4. Foreign Address: * Address 1:	Foreign Address	
Address 2:		
City:	Foreign City	
Province/Territory:		
* Country:	BAHAMAS, THE	
Postal Code:		
5. Passport Number:		
6. Passport Issuing Country:		
7. Passport Expiration Date:	(MM/DD)(YYYY)	
8. Visa Number:		
9. Post/Country of Visa Issuance:	<u> </u>	
10. Visa Expiration Date:	(MM(DD)YYY)	
11. Admission Number:		
12. Port of Entry:	2	
13. Date of Entry:	(WW/DD/YYY)	
14. Remarks:	2 Y	
	Update Information Reset Values Cancel	
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M-1 student arrives at school. The designated school official enters registration information. Includes current session, next session start date, and U.S. address.

M-1 student OPT Employment request screen

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Alexander In	stitute		
	OPT Employment		
	SEVIS ID: N0000128741		
	Family Itame: M Record First Itame: Primary		
	Prosinance Primary Date of Birth: 07/25/1075		
	Country of Birth: BAHAMAS, THE		
	Country of Ottoenship: BANAMAS, THE Gender: MALE		
	School Hame: Alexander Institute - Alexander Campus		
	Program Start Date: 12/01/2010 Program End Date: 12/01/2011		
	Visit Type M-1		
	Status: ACTIVE		
	No employment data found for student		
of unemployment) and been amended and the	Optional Practical Training (OPT), you must ensure that the training complies with the rules governing OPT. You must also ensure that the student is aware of his/her obligation to report changes in his/her address. The school must continue to maintain records on the student for the full period of OPT. You must also ensure that the student is aware of his/her obligation to report changes in his/her address. The school must continue to maintain records on the student for the full period of OPT. You must also ensure that the student is aware of his/her obligation to report changes in his/her address. The school must continue to maintain records on the student for the full period of OPT. You must also ensure that the student is aware of his/her obligation to report changes in his/her address. The school must continue to maintain records on the student for the full period of OPT. You must also ensure that the student is aware of his/her obligation to report changes in his/her address. The school must continue to maintain records on the student for the full period of OPT. You must also ensure that the student is a school must continue to amaintain records on the student for the full period of OPT. You must also ensure that the student is a school must contain the full period of OPT. The details of these rules can be found in the Code of Federal Regulations. The student is a school must contain the school must contain the school must be student to other aware of his/her address. The student to other address the school must contain the school must be student to other address. The school must be student to other address the school must be school must b	employment information (to include periods Sections 214.2(f)(10) to (f)(13). The CFR has	
New OPT Employment			
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Alexander Institute			
	Add OPT Employment		
	Required fields are marked with an asterisk (*).		
1. [#] Employment Start Date:	(MM/DD/YYYY)		
2. " Employment End Date:	(MN/DD/YYYY)		
3. * Full Time/Part Times	I		
4. Employer Name:			
5. Employer Address:			
Address 1; Address 2;	_		
City			
State:	2		
6. Explain how the employment is related to course work:	2		
7. ¹¹ Has the student met the 1 full academic year requirement?	X		
8. Employment Remarks: (This text will print on page 3 of the Form 1-20.)	2		
9. Student Remarks:			
(This text will print on page 1 of the Form 1-20.)	A N		
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