



Phone 617-253-3795
Fax 617-258-5483
<http://web.mit.edu/iso/>

Academic Training Worksheet

Last name: _____ First name: _____

MIT ID: _____ SEVIS #: N _____

MIT Email address: _____ Phone number: _____

Non-MIT E-mail address (required): _____

Degree Level: Bachelor's Master's Doctoral

Major field of study for academic training: _____

Full-time Part-time Pre-completion Post-completion

Number of hours per week: _____ Salary/Stipend: _____

Employer's name: _____

Employer's physical address
(place you will be working): _____

(provide complete address) _____

Supervisor's name: _____

Supervisor's title: _____

Supervisor's phone: _____

Supervisor's email address: _____

Academic training start date: _____ End date: _____
(mm/dd/yyyy) (mm/dd/yyyy)

Academic Training Objectives: *Please provide a paragraph concerning your academic training objectives for this off-campus experience. This is a SEVIS requirement (use the reverse side of this form if more space is needed).*

Please see reverse of this form for: Academic Training history and Required Reporting Requirements sections and required student acknowledgement signature



Academic Training history for all previous experiences, at any Degree level:

Degree level:
AT Employer name and address:
Dates of AT:

Degree level:
AT Employer name and address:
Dates of AT:

Degree Level
AT Employer name and address:
Dates of AT:

Total months AT used before this AT request:

Required reporting requirements:

During the duration of both your studies and your academic training authorization, if you change your address, you are required to update in WebSIS your new SEVIS address within 10 days of moving.

If you no longer have access to WebSIS, please email iso-help@mit.edu with your new address.

Failure to report an address change could result in the loss of your AT authorization and, possibly, loss of your legal status in the U.S.

Any academic training (AT) used prior to completion of studies will be subtracted from the total AT eligibility limits. During the academic year, students may only engage in part-time AT. Note that AT is always subtracted at a full-time rate from the overall eligibility. Students must be registered full-time in a degree program in order to be eligible for pre-completion AT. Students must maintain required health insurance coverage throughout their period of stay, including periods of authorized Academic Training after completion of program of study.

I certify the information provided is correct and that I have read and I understand the above paragraph.

Signature

Date

US SEVIS Address: _____
