

**OPT Forfeit Letter**

Please submit via email to: askccas@gwu.edu

Please note: your OPT forfeit date must be no later than January 10, 2025.

Today's Date: \_\_\_\_\_

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

Degree and Program: \_\_\_\_\_

GW ID Number (GWID): \_\_\_\_\_

By signing this form, I acknowledge that my OPT status will be terminated on the date that my I-20 for

Spring 2025 is issued. The date that I want my I-20 to be issued is: \_\_\_\_\_.

Hand Written Signature \_\_\_\_\_