

Certification by Designated School Official

SECTION A. This section must be completed by student, as appropriate (Please print or type):

1. Name: (Family in CAPS) (First) (Middle)	2. Date of birth:
3. Student admission number:	4. Date first granted F-1 or M-1 status:
5. Level of education being sought:	6. Student's major field of study:
7. Describe the proposed employment for practical training:	

Beginning date: _____ Ending date: _____ Number of hours per week: _____

8. List all periods of previously authorized employment for practical training:

A. Curricular or work/study:	B. Post completion of studies

Signature of student: _____ Date: _____

SECTION B. This section must be completed by the designated school official (DSO) of the school the student is attending or was last authorized to attend:

9. I hereby certify that:

The student named above:

- Is taking a full course of study at this school, and the expected date of completion is: _____
- Is taking less than a full course of study at this school because: _____
- Completed the course of study at this school on (date): _____
- Did not complete the course of study. Terminated attendance on (date): _____

Check one:

- A. The employment is for practical training in the student's field of study. The student has been in the educational program for at least nine (9) months, is in good academic standing, and is eligible for the requested practical training in accordance with INS regulations at 8 CFR 214.2(f)(10). The training that the student will participate in is an integral part of an established curriculum.
- B. The employment is for an internship with a recognized international organization and is within the scope of the organization's sponsorship. The student is in good academic standing.

10. Name and title of DSO:	Signature:	Date:
11. Name of school:	School file number:	Telephone no.:

For Official Use Only

Microfilm Index Number:

(See instructions on reverse)

Instructions

A student seeking authorization for off-campus employment (F-1 only) or practical training (F-1 and M-1) must submit as supporting documentation to Form I-765, Application for Employment Authorization, a certification by the designated school official (DSO) of the school the student was last authorized to attend.

Certification by the DSO is required of all students (F-1 and M-1) seeking authorization for employment off campus or practical training, including required or optional curricular practical training.

The DSO must certify on Form I-538 that the proposed employment is directly related to the student's field of study.

Where to Submit Certification.

A copy of the DSO's certification must be mailed to: ACS Students/Schools (STSC) Section, P.O. Box 270, London, KY 40741. Overnight carrier deliveries must be sent to: ACS - INS, INS Students/Schools (STSC) Section, 1084 South Laurel Road, London, KY 40744.

All students requesting school certification must complete questions 1 through 6. Students requesting recommendation for practical training must complete questions 7 and 8. Answers to questions 7 through 9 may be continued on this page, if needed.

Since the I-538 is used by the DSO for certification purposes, no fee is required for submission of this form.

NOTE: M-1 students seeking extensions of stay must file a completed Form I-539, Application to Extend/Change Nonimmigrant Status, supported by a current Form I-20M-N, as appropriate. The I-539 application must be submitted to the INS service center that has jurisdiction over the student's residence.

Reporting Burden.

An agency may not conduct or sponsor an information collection and a person is not required to respond to an information collection unless it contains a currently valid OMB control number. The public reporting burden for this collection of information is estimated to average 4 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Justice, Immigration and Naturalization Service, HQPDI, 425 I Street N.W., Room 4034, Washington, DC 20536; OMB No. 1115-0060. **DO NOT MAIL YOUR COMPLETED CERTIFICATION TO THIS ADDRESS.**

Comments: _____
