



INTERNATIONAL PROGRAMS OFFICE

9388 Lightwave Avenue, 185A, San Diego, CA 92123-1426 (858) 541-7960 • fax (858) 541-7995 • www.nu.edu • ipo@nu.edu

STEM OPT Extension Validation Form

(Student / Employer Information Form)

Please fill out the form and submit it to the International Programs Office: 9388 Lightwave Ave #185A, San Diego, CA 92123, or fax it to 858-541-7995, or send a digital copy to ipo@nu.edu. Any updates to this information must be submitted to the International Programs Office on this form within 10 days. Students on STEM extensions are required to file this form every six months, whether there are changes or not.

Devendrappagari Konanki	Nanda Kishore	023740842
Student's Last Name	Student's First Name	Student I.D. Number
904 Rivendell way	Edison	NJ 08817
Street Address	City	State Zip Code
nanda.konanki@yahoo.com	2345759778	N0015934427
Email Address	Phone Number	SEVIS I.D. Number (on I-20)

Section A. Employment Information. Please check the box that applies to your current employment situation.

<input checked="" type="checkbox"/> Employed by One Employer	<input type="checkbox"/> Employed by Multiple Employers	<input type="checkbox"/> Self-Employed
<input type="checkbox"/> Have Multiple Short-Term Jobs	<input type="checkbox"/> Not Currently Employed	

Section B. Current Employer Information. Please provide us with your most current employer's information, and check the box for your primary employer if you have more than one.

1. ☒ Check box if this is your primary employer

Krypto IT Solutions INC	463100055	922169
Name of Employer (business name)	(Employer Identification Number/ XX-XXXXXXX/Required)	Employer's E-Verify Number(Required)
Software Developer	<input checked="" type="checkbox"/> Full Time (More than 20hrs/week)	04/10/2018
Job Title	<input type="checkbox"/> Part Time (20 or less than 20hrs/week)	Employment Start Date (mm/dd/yyyy)
Nettem	Raju	5083618775
Supervisor Last Name	First Name	Supervisor Phone #
1001 Durham Ave.Suit 202	South Plainfield	NJ 07080
Street Address	City	State Zip Code

Explain how employment is related to your course of study (Max 1000 characters).

As part of my Master's Course I have taken the courses on Software Engineering, JAVA, DataBase Design and Impl, User Interface Engineering and Security in Computing. I have been working in Java using Database skills that I have acquired during my course. Besides these I'm also working on cloud computing components. In this way I'm working on the technologies and functions that I have acquired knowledge during my masters and trying to update myself on the latest technological stack.

2. ☐ Check box if this is your primary employer

Name of Employer (business name) -- (Employer Identification Number/ XX-XXXXXXX/Required) Employer's E-Verify Number(Required)

Job Title ☐ Full Time (More than 20hrs/week) _____
☐ Part Time (20 or less than 20hrs/week) Employment Start Date (mm/dd/yyyy)

Supervisor Last Name First Name Supervisor Phone # Supervisor Email Address

Employer Address City State Zip Code

Explain how employment is related to your course of study (Max 1000 characters).

Section C. Previous Employer Information and End Date (if any). Please provide your previous employer's information (if you had any) including the end date of your employment.

Name of Previous Employer Employment End Date

Section D. I-20 Pick-Up or Shipment Confirmation

☐ Check box if you plan to pick-up your I-20 at our office

☒ Check box if the address you want your I-20 shipped to is the same as your mailing address, if not please provide a shipping address below:

904 Rivendell Way Edison NJ 08817
Street Address City State Zip Code

Student's Signature 10/01/2018
Date