


I-765 Completion Guide for Optional Practical Training

Pay close attention to the **yellow highlighted text**.

 Red circled items are required.



Application For Employment Authorization

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-765
OMB No. 1615-0040
Expires 07/31/2022

- **START HERE - Type or print in black ink.** Answer all questions fully and accurately. If a question does not apply to you (for example, if you have never been married and the question asks, "Provide the name of your current spouse"), type or print "N/A" unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, "How many children do you have" or "How many times have you departed the United States"), type or print "None" unless otherwise directed.

For Post-Completion OPT, select 1.a.

Part 1. Reason for Applying

I am applying for (select **only one** box):

- 1.a.** Initial permission to accept employment.
- 1.b.** Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document **NOT DUE** to U.S. Citizenship and Immigration Services (USCIS) error.

NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to **Replacement for Card Error** in the **What is the Filing Fee** section of the Form I-765 Instructions for further details.

- 1.c.** Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 6**.

Additional Information.

- 2.a.** Family Name (Last Name)
- 2.b.** Given Name (First Name)
- 2.c.** Middle Name
- 3.a.** Family Name (Last Name)
- 3.b.** Given Name (First Name)
- 3.c.** Middle Name
- 4.a.** Family Name (Last Name)
- 4.b.** Given Name (First Name)
- 4.c.** Middle Name

For OPT STEM, select 1.c.

Part 2. Information About You

Your Full Legal Name

- 1.a.** Family Name (Last Name)
- 1.b.** Given Name (First Name)
- 1.c.** Middle Name

1.a, 1.b. and 1.c. Please input your name as listed in your passport. If the field does not apply to you, input "N/A"

Form I-765 Edition 08/25/20



Page 1 of 7

Ensure the edition you are using is correct. Currently, the edition used is 8/25/2020. Follow the edition listed on the USCIS webpage.

NOTE: This is a guide and does not supersede any guidance from USCIS. Applicants are responsible for reading USCIS I-765 instructions to ensure their form is completed correctly. The decision to approve or deny OPT or OPT STEM Extension application is at the discretion of USCIS.

Part 2. Information About You (continued)
Your U.S. Mailing Address *(USPS ZIP Code Lookup)*

5.a. In Care Of Name (if any)

5.b. Street Number and Name

5.c. Apt. Ste. Flr.

5.d. City or Town

5.e. State 5.f. ZIP Code

5.a. Please input an address that will be valid for the next 5 months. Complete this line only if you are using an address where someone besides you will be collecting your mail. Type that individual's name in the "In Care Of" field.

6. Is your current mailing address the same as your physical address? Yes No

6. If you are using an address that is not your own, you will need to select "No" and input your current address in the U.S. Physical Address field. If you are using the same address, then select "Yes" and leave the U.S. Physical Address fields blank.

NOTE: If you answered "No" to **Item Number 6.**, provide your physical address below.

U.S. Physical Address

7.a. Street Number and Name

7.b. Apt. Ste. Flr.

7.c. City or Town

7.d. State 7.e. ZIP Code

Other Information

8. Alien Registration Number (A-Number) (if any)
 ▶ A-

9. USCIS Online Account Number (if any)
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8. and 9. Input "NONE" unless you do have an A-Number or USCIS Online Account Number.

10. Gender Male Female

11. Marital Status
 Single Married Divorced Widowed

12. Have you previously filed Form I-765?
 Yes No

12. If you have applied for any I-765 benefit in the past, you will need to indicate "Yes"

13.a. Has the Social Security Administration (SSA) ever officially issued a Social Security card to you?
 Yes No

13.a and 13.b Input your SSN, if you have. If not, you will need to indicate "No" and leave 13.b blank.

NOTE: If you answered "No" to **Item Number 13.a.**, skip to **Item Number 14.** If you answered "Yes" to **Item Number 13.a.**, provide the information requested in **Item Number 13.b.**

13.b. Provide your Social Security number (SSN) (if known).
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14. Do you want the SSA to issue you a Social Security card?
(You must also answer "Yes" to **Item Number 15.**,
Consent for Disclosure, to receive a card.)

Yes No

NOTE: If you answered "No" to **Item Number 14.**, skip to **Part 2.**, **Item Number 18.a.** If you answered "Yes" to **Item Number 14.**, you must also answer "Yes" to **Item Number 15.**

15. **Consent for Disclosure:** I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security card.

Yes No

NOTE: If you answered "Yes" to **Item Numbers 14. - 15.**, provide the information requested in **Item Numbers 16.a. - 17.b.**

Father's Name

Provide your father's birth name.

16.a. Family Name (Last Name)

16.b. Given Name (First Name)

Mother's Name

Provide your mother's birth name.

17.a. Family Name (Last Name)

17.b. Given Name (First Name)

Your Country or Countries of Citizenship or Nationality

List all countries where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in **Part 6. Additional Information.**

18.a. Country

18.b. Country

If you do not have a social security number, you can input "Yes" in #14 and "Yes" in #15 as well as complete fields #16 and #17.

If you have a social security number, indicate "No" for #14 and leave #15 and #16 blank.

Input your passport country. If you are a dual citizen, complete 18.b. as well.

Part 2. Information About You (continued)
Place of Birth

List the city/town/village, state/province, and country where you were born.

19.a. City/Town/Village of Birth

19.b. State/Province of Birth

19.c. Country of Birth

20. Date of Birth (mm/dd/yyyy)

Input your biographical information for #19

19. Make sure to use the Month/Day/Year format for your birthday.

Information About Your Last Arrival in the United States

21.a. Form I-94 Arrival-Departure Record Number (if any)

21.b. Passport Number of Your Most Recently Issued Passport

21.c. Travel Document Number (if any)

21.d. Country That Issued Your Passport or Travel Document

21.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy)

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)

23. Place of Your Last Arrival Into the United States

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

▶ N-

Your I-94 number can be found [online](#), unless you did a change of status in the United States to which you will use the I-94 number listed on your I-797 Notice of Action.

If 21.c. does not apply, input "NONE". Ensure you use the month/day/year format for 21.e.

Your place of last arrival can also be found on your I-94 travel history or the entry stamp listed on your passport.

Information About Your Eligibility Category

27. **Eligibility Category.** Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).

(c) (3) (B)

For Post-Completion OPT: Use (c)(3)(B) for #27 and indicate N/A and NONE for the rest of the fields.

28. **(c)(3)(C) STEM OPT Eligibility Category.** If you entered the eligibility category **(c)(3)(C)** in **Item Number 27.**, provide the information requested in **Item Numbers 28.a. - 28.c.**

28.a. Degree

28.b. Employer's Name as Listed in E-Verify

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. **(c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Item Number 27.**, provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.

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Information About Your Eligibility Category

27. **Eligibility Category.** Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).

(c) (3) (c)

For OPT STEM applications, use (c)(3)(C) for #27 and input the circled fields.

28. **(c)(3)(C) STEM OPT Eligibility Category.** If you entered the eligibility category **(c)(3)(C)** in **Item Number 27.**, provide the information requested in **Item Numbers 28.a. - 28.c.**

28.a. Degree

28.b. Employer's Name as Listed in E-Verify

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. **(c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Item Number 27.**, provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.

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Part 2. Information About You (continued)

If you answered "Yes" to **Item Number 30.c.**, provide the following information:

30.d. Date you presented yourself to DHS

30.e. Location where you presented yourself to DHS

30.f. Country of claimed persecution

30.g. Provide an explanation for why you did not enter the United States lawfully through a U.S. port of entry. If you need extra space to complete this item, use the space provided in **Part 6. Additional Information.**

NOTE: Refer to the **Special Filing Instructions for Those With Pending Asylum Applications (c)(8)** section of the Form I-765 Instructions for more information.

31.a. **(c)(35) and (c)(36) Eligibility Category.** If you entered the eligibility category (c)(35) in **Item Number 27.**, please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in **Item Number 27.**, please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.

31.b. If you entered the eligibility category (c)(35) or (c)(36) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime? Yes No

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

1.a. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

1.b. The interpreter named in **Part 4.** read to me every question and instruction on this application and my answer to every question in

a language in which I am fluent, and I understood everything.

2. At my request, the preparer named in **Part 5.**

prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number

4. Applicant's Mobile Telephone Number (if any)

5. Applicant's Email Address (if any)

6. Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Applicant's Signature

7.a. Applicant's Signature

7.b. Date of Signature (mm/dd/yyyy)

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Skip checkboxes 30.a. to 30.c. on page 3. Then continue to input "N/A" or "NONE" in fields not relevant to you for the rest of the fields on page 4 and 5.

Complete all red circled areas to the left. If you have an attorney assisting you, indicate their name in 2.

For your signature, use wet ink. No e-signatures. Keep your signature within the box.

Please read through the examples below to complete page 7.

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number, Part Number, and Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. A-Number (if any) ▶ A-

3.a. Page Number 3.b. Part Number 3.c. Item Number

3.d. List all CPT authorizations, if applicable. For example:

FT CPT; Company Name; Bachelor's;
 SEVIS #: 09/01/2019-10/20/2019

4.a. Page Number 4.b. Part Number 4.c. Item Number

4.d. List all OPT authorizations, if applicable. For example:

FT OPT; Company Name; Master's;
 SEVIS #: 07/07/2017-07/06/2018

5.a. Page Number 5.b. Part Number 5.c. Item Number

5.d. List all SEVIS numbers along with degree level. For example:

N0012345676; Master's; Washington Uni.
 N0012131414; Secondary; Cville H.S.

6.a. Page Number 6.b. Part Number 6.c. Item Number

6.d. If you entered the U.S. with a passport that is no longer valid and you have a new passport, enter this: I most recently entered the U.S. on MM/DD/YYYY with passport #, and was issued I-94 #. Since this date, I have renewed by passport. My new passport number is #. See attached copies for both passport & I-94.

7.a. Page Number 7.b. Part Number 7.c. Item Number

7.d.

If applicable

If applicable

If applicable

If applicable

Wet signature and date here