## Sample of I-765 | Application for OPT Employment Authorization

Use this sample form as a guide when filling out your application.

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### Instructions

**Note:** We strongly recommend to type this form. Please refer to the USCIS I-765 instructions for line by line guidance on how to fill out the form.

If you feel you do not have enough space to answer any questions, use the space provided in Part 6.

It is acceptable to handwrite information in fields that may not be fillable.

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### Form Filling Tips

- **Check this box for all types of OPT (i.e. Pre, Post, STEM).**
- **This name should match your passport.**

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### Form Filling Guide

#### Part 1. Reason for Applying

| I.a. | Initial permission to accept employment. |
| I.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. |
| I.e. | Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.) |

#### Part 2. Information About You

<table>
<thead>
<tr>
<th>Your Full Legal Name</th>
<th>Doe</th>
</tr>
</thead>
</table>

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<table>
<thead>
<tr>
<th>Part 2. Information About You (continued)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Your U.S. Mailing Address</strong></td>
</tr>
<tr>
<td>5.a. In Care Of Name (if any)</td>
</tr>
<tr>
<td>J. Smith</td>
</tr>
<tr>
<td>5.b. Street Number and Name</td>
</tr>
<tr>
<td>123 W 50th St</td>
</tr>
<tr>
<td>10A</td>
</tr>
<tr>
<td>5.d. City or Town</td>
</tr>
<tr>
<td>New York</td>
</tr>
<tr>
<td>5.e. State □ S. ZIP Code</td>
</tr>
<tr>
<td>NY 10027</td>
</tr>
</tbody>
</table>

6. Is your current mailing address the same as your physical address? □ Yes □ No
   
   **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.c. City or Town
   7.d. State □ S. ZIP Code

**Other Information**

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

9. USCIS Online Account Number (if any)

10. Gender □ Male □ Female

11. Marital Status
   □ Single □ Married □ Divorced □ Widowed

12. Have you previously filed Form I-765?
   □ Yes □ No
   
   **NOTE:** If you answered “No” to Item Number 12a, answer “No” to 14, 15, and 16-17.

13.b. Provide your Social Security number (SSN) (if known).

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 18a. 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 16a - 17b.

**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

**Answer “No” if you were never issued an SSN card. Skip 13b and complete 14 - 17.**

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**Please note:** You are not required to request an SSN using this application.

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**If you do not have an SSN or need a replacement card, you answer “Yes” to 14 and 15 and complete 16 and 17.**

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**Handwrite your current physical address at the time of application.**

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**This is not fillable. Must handwrite.**

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**This number is listed on your most recent EAD card. It can be found under the “USCIS #” area. If you do not have one or lost it then you can leave blank.**

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**Refer to the USCIS I-765 Instructions- Item 9 on page 17. Leave this blank if it does not apply to you.**

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**Answer “Yes”:
- if you still have your SSN card. Complete 13b, answer “No” to 14, and leave 15-17 blank.
- if you had an SSN card and would like a replacement card. Answer “Yes” to 14 and 15 and complete 16-17.**

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### Part 2. Information About You (continued)

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

| 19a. City/Town/Village of Birth | Beijing |
| 19b. State/Province of Birth |  |
| 19c. Country of Birth | China |

| 20. Date of Birth (mm/dd/yyyy) | 01/01/1990 |

#### Information About Your Last Arrival in the United States

| 21a. Form I-94 Arrival-Departure Record Number (if any) | 1 2 3 4 5 6 7 8 9 0 |
| 21b. Passport Number of Your Most Recently Issued Passport | 1234567123456 |
| 21c. Travel Document Number (if any) |  |
| 21d. Country That Issued Your Passport or Travel Document | China |
| 21e. Expiration Date for Passport or Travel Document (mm/dd/yyyy) | 08/01/2028 |
| 22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy) | 01/01/2017 |
| 23. Place of Your Last Arrival Into the United States | JFK, New York, NY |

| 24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status) | F-1 Student |
| 25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category) | F-1 Student |

#### Information About Your Eligibility Category

| 27. Eligibility Category. If you entered the eligibility category (c)(10) in Item Number 27, provide the receipt number of your Form I-130 Notice for Form I-130, Petition for a Nonimmigrant Worker. |  |
| 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 28a - 28c. |
| 28a. Degree | Bachelor's, Computer Science |
| 28b. Employer's Name as Listed in E-Verify Google Inc. |
| 28c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number | 1234 |

| 29. (c)(16) Eligibility Category. If you entered the eligibility category (c)(16) in Item Number 27, provide the receipt number of your I-140, Petition for a Nonimmigrant Worker. |  |
| 30. (c)(8) Eligibility Category. If you entered the eligibility category (c)(8) in Item Number 27, have you EVER been arrested for and/or convicted of any crime? | Yes [ ] No [x] |

**NOTE:** If you answered “Yes” to Item Number 30, refer to Special Filing Instructions for Those With Pending Asylum Applications (c)(8) in the Required Documentation section of the Form I-765 Instructions for information about providing court dispositions.

| 31a. (c)(35) and (c)(36) Eligibility Category. If you entered the eligibility category (c)(35) or (c)(36) in Item Number 27, please provide the receipt number of your Form I-197 Notice for Form I-140, Petition for Alien Worker. |  |
| 31b. 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 [x] |

**NOTE:** If you answered “Yes” to Item Number 31b, refer to Employment-Based Nonimmigrant Categories, Items 8 to 9, in the Who May File Form I-129 Instructions for information about providing court dispositions.
### Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

**NOTE:** Read the Penalties section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

#### 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
   212-123-4567

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

5. Applicant's Email Address (if any)
   jd123@columbia.edu

6. Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC Act and its amendments.

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### Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

#### Interpreter's Full Name

1.a. Interpreter's Family Name (Last Name)

1.b. Interpreter's Given Name (First Name)

2. Interpreter's Business or Organization Name (if any)