

OMB No. 1615-0040; Expires 09/30/11 **I-765, Application For**

Employment Authorization

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

Do not write in this block.

Remarks	Action Block			Fee Sta	amp			
A#	†							
	1							
Applicant is filing under §274a.12	4 1/5	1/0: 1.2		-			(D)	
Application Approved. Employment A	uthorized / Extended	(Circle One)	until _				(Date). (Date).	
Subject to the following conditions:							(Date). 	
Application Denied. Failed to establish eligibility unde	r 8 CFR 274a.12 (a)	or (c).						
Failed to establish economic neces			(14), (18) and	8 CFR 214.2	2(f)			
I am applying for: Permission to ac								
	flost employment au permission to accept			employment o	authorization	document).		
Name (Family Name in CAPS) (First)	(Middle)		nich USCIS Offi			Date(:	s)	
BOND James								
2. Other Names Used (Include Maiden Name)			Results (Granted or Denied - attach all documentation)					
3. Address in the United States (Number and Street	et) (Apt. Nu	mber) 12 Da	te of Last Entry	into the ITS	(mm/dd/vvvv)	<u> </u>		
international Services 120 Kimball Building			12. Date of Last Entry into the U.S. (mm/dd/yyyy)					
(Town or City) (State/Country	and to our and	de) 13. Pla	13. Place of Last Entry into the U.S.					
Restaurg ID 83460-1689			Phoenix, Arizona					
4. Country of Citizenship/Nationality			14. Manner of Last Entry (Visitor, Student, etc.)					
5. Place of Birth (Town or City) (State/Province) (Country)			15. Current Immigration Status (Visitor, Student, etc.)					
London	nd s	Student						
o. Date of Birdi (illinoda jijiji	Gender		to Part 2 of the				pace below, he instructions	
	Male Fema	le (Fo	or example, (a)(8	3), (c)(17)(iii),	etc.).	sciected from	ile maraettona	
8. Marital Status Married Widowed	Single Divorced	Eligib	ility under 8 CF	R 274a.12 (C) (3)	(b)	
9. Social Security Number (Include all numbers you have ever used) (if any)			17. If you entered the Eligibility Category, (c)(3)(C), in item 16 above, list your degree, your employer's name as listed in E-Verfy, and your employer's E-Verify Company Identification Number or a valid E-Verify					
10. Alien Registration Number (A-Number) or I-9		Client Company Identification Number in the space below.						
11. Have you ever before applied for employment	authorization from US	Degree						
Yes (If yes, complete below)	Linpio	Employer's Name as listed in E-Verify:						
Tes (ii yes, complete below)		Employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number						
Certification						-		
Your Certification: I certify, under per								
correct. Furthermore, I authorize the rele eligibility for the benefit I am seeking. I								
Block 16.	nave read the insti		2 and have 1	dentified th	ie appropriat	m/121	2011	
Signature		Telephone Number Date						
Signature of person preparing for request of the applicant and is based on a					ent was prep	ared by me	at the	
	Address		Signature		Date			
<u> </u>	marks Initial Receipt Resul		Reloc	Completed				
Remarks	mitiai Receipt	Resubmitted	Rec'd	Sent	Approved	Denied	Returned	
					Fo	rm I-765 (Rev.	10/30/08)Y	