

# INTERNATIONAL OFFICE

## NORTHWESTERN UNIVERSITY

# Sample I-765 Form for OPT applications

Updated 02/2012

Use this sample to help guide you when you fill out the I-765. The IO advisor will go over the form with you when you apply for OPT. **Always download and use the most recent I-765 directly from [www.uscis.gov](http://www.uscis.gov).** Using an outdated form will result in your OPT application being returned or rejected.

OMB No. 1615-0040

**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 Stamp
A#		
Applicant is filing under §274a.12 _____		
<input type="checkbox"/> Application Approved, Employment Authorized / Extended (Circle One) until _____ (Date). Subject to the following conditions: _____ (Date). Application Denied. <input type="checkbox"/> Failed to establish eligibility under 8 CFR 274a.12 (a) or (c). <input type="checkbox"/> Failed to establish economic necessity as required in 8 CFR 274a.12(c)(14), (18) and 8 CFR 214.2(f)		

I am applying for:

Permission to accept employment.  
 Replacement (of lost employment authorization document).  
 Renewal of my permission to accept employment (attach previous employment authorization document).

1. Name (Family Name in CAPS) (First) (Middle) Which USCIS Office? Date(s)  
**WANG Sharon**

2. Other Names Used (include Maiden Name) Results (Granted or Denied - attach all documentation)  
 In care of the International Office

3. Address in the United States (Street Number and Name) (Apt. Number) 12. Date of Last Entry into the U.S. (mm/dd/yyyy)  
 630 Dartmouth Place 01/01/2012

(Town or City) (State/Country) (ZIP Code) 13. Place of Last Entry into the U.S.  
 Evanston IL 60208 Chicago

4. Country of Citizenship/Nationality 14. Manner of Last Entry (Visitor, Student, etc.)  
 China F-1 student

5. Place of Birth (Town or City) (State/Province) (Country) 15. Current Immigration Status (Visitor, Student, etc.)  
 Beijing China F-1 student

6. Date of Birth (mm/dd/yyyy) 7. Gender 16. Go to Part 2 of the Instructions, Eligibility Categories. In the space below, place the letter and number of the category you selected from the instructions (For example, (a)(8), (c)(17)(iii), etc.).  
 01/01/1990  Male  Female Eligibility under 8 CFR 274a.12 ( ) ( ) ( )

8. Marital Status  Married  Single  Divorced 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-Verify, and your employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number in the space below.  
 Widowed Degree: \_\_\_\_\_  
 Employer's Name as listed in E-Verify: \_\_\_\_\_  
 Employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number: \_\_\_\_\_

9. Social Security Number (include all numbers you have ever used) (if any) 123-45-6789

10. Alien Registration Number (A-Number) or I-94 Number (if any) 123456789 12

11. Have you ever before applied for employment authorization from USCIS?  
 Yes (If "Yes," complete below)  No

**Certification**  
 Your Certification: I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the Instructions in Part 2 and have identified the appropriate eligibility category in Block 16.

Signature: Sharon Wang Telephone Number: (847) 123-4567 Date: 02/02/2012

Signature of Person Preparing Form, If Other Than Above: I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

Print Name: \_\_\_\_\_ Address: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

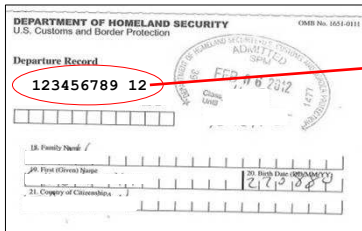
Remarks	Initial Receipt	Resubmitted	Relocated		Completed		
			Rec'd	Sent	Approved	Denied	Returned

Form I-765 (Rev. 01/19/11)Y

1. Family name must be in CAPS

3. This is the address where your EAD card will be sent. If you will be moving or traveling, we recommend you use the IO address:  
 In c/o International Office  
 630 Dartmouth Place  
 Evanston, IL 60208

10. I-94 card number



11. Only check "yes" if you have applied for OPT before.

11. (continued)  
 Only complete if you have applied for OPT before

Code differs by application type:  
 Post-completion:(C)(3)(B)  
 STEM: (C)(3)(C)  
 Pre-Completion:(C)(3)(A)