

OMB No. 1615-0040; Expires 09/30/2011

I-765, Application For Employment Authorization

Department of Homeland SecurityU.S. Citizenship and Immigration Services

One of these boxes must be checked or USCIS will return your application.

This is the address to which the EAD will be mailed. Be sure it is complete, clear and accurate. If you will not live at this address for at least three months after you submit the application, use the International Center's address.

Complete section 17 **only** if you are applying for the 17-month OPT extension for STEM majors. Degree should be entered as "bachelor's," "master's" or "doctorate."

Answer yes only if you have applied directly to USCIS for employment authorization before. This does not include on-campus employment or CPT authorization.

Remember to / sign and date the form. Include your home or cell phone number. Keep your entire signature between the lines.

Do not write in this block.				
Remarks	Action Block		Fee Stamp	
A#				
Applicant is filing under §274a.12	_			
Application Approved. Employmen	nt Authorized / Extended (Circl	le One) until	Į.	(Date).
SEE THIS IS IS CONTINUE IN MICH.				(Date).
Subject to the following condition Application Denied.	IS:			
Failed to establish eligibility u	ınder 8 CFR 274a.12 (a) or (c).			
Falled to establish economic r	necessity as required in 8 CFR 2	274a.12(c)(14), (18) and 8 C	FR 214.2(f)	
	to accept employment.			
	nt (of lost employment authoriza		loyment authorization document)	
. Name (Family Name in CAPS) (First)	(Middle)	Which USCIS Office?	*	te(s)
STUDENT John	(widdic) Isa	Timul Cocio Gillo.	174	ic(s)
Other Names Used (include Maiden Name	G.	Results (Granted or Do	enied - attach all documentation)	
. Other Panies Costs (Include Praiser Panie	,			
ddress in the United States (Number and	Street) (Apt. Number)	12. Date of Last Entry into	the U.S. (mm/dd/yyyy)	This is the pla
452 Memorial Union		01/17/2011		where your I-9
(Town or City) (State/C	water construction of	13 Place of Last Entry int	o the II S.	card was issu
Columbia MO	65211	Chicago	Ottober Ottober 1	
Country of Citizenship/Nationality Jnited Kingdom		14. Manner of Last Entry (F-1 Student	visitor, Student, etc.)	
	rovince) (Country)		tatus (Visitor, Student, etc.)	-
5. Place of Birth (Town or City) (State/P Cardiff Wales	And the state of t	F-1 Student	tatus (visitor, student, etc.)	
400 (400 Calculus Cal	7. Gender	16. Go to Part 2 of the Ins	structions, Eligibility Categories. In th	ne space below,
Date of Birth (mm/dd/yyyy)	Male Female	place the letter and nur (F <u>or example, (a)(8), (</u>	nber of the category you selected from c)(17)(iii), etc.).	m the instructions
B. Marital Status Married	Single	Eligibility under 8 CFR 2		
Widowed	Divorced		() ()	
9. Social Security Number (include all number 123–45–6789	ers you have ever used) (if any)		ibility Category, (e)(3)(C), in item 10 's name as listed in E-Verfy, and you	
1 THE CONTROL OF THE	T OA DIT A LOUIS COMMON	 Verify Company Ident 	ification Number or a valid E-Verify	
10 Alien Registration Number (A-Number) of 58326800702	n 1-94 Number (if any)	Identification Number	in the space below.	1
1. Have you ever before applied for employe	ment authorization from USCIS?	Degree: Employer's Name as liste	d in E-Verify:	
Yes (If "Yes," complete below) No		Employer's E-Verify Company Identification Number or a valid E-Verify		
		Client Company Identific		
Certification				
Your Certification: I certify unde	r penalty of perjury under th	e laws of the United State	es of America, that the foregoi	ing is true and
correct. Furthermore, I authorize the	release of any information t	that U.S. Citizenship and	Immigration Services needs to	o determine
eligibility for the benefit I am seek	g. I have read the Instruction	ns in Part 2 and have ide	ntified the appropriate eligibil	ity category in
Block 16.				30
_{Signature} John Isa Studen	+	Telephone Number	Da 01.0	ate /31/201
-		(573) 555-1	212	
Signature of Person Prepari			t this document was prepared	by me at the
equest of the applicant and is based	on all information of which		Pro-com	pletion OPT:
Print Name	Address	Signature	(0) (2)	•
D	583268007	DE STECIMEN		npletion OPT:
Remarks	203500001	U.S. IMMIGRATION	Approve (c) (3)	•
	Immigration and	250 WAS	(0) (3)	n STEM extensio
	Immigration and Naturalization Service	SEP 1 3 1991	(c) (3)	
	I-94 Departure Record	ADMITTED F-1	107 (07	
		LINTIC DIS		
	STUDENT	- 10		
	STUDENT	Birth Da	ite (Day/Mo/Yr)	
	IIIOHN	6.7.6	18.63	