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24-Month **STEM OPT** Extension

Form I-765 **Paper Filing** Guide

Last updated 1/2024

- ☑ As of 12/4/2020, the current version of Form I-765 is the 8/25/2020 Edition. **Please consult USCIS's Form I-765 page and contact an ISO advisor to confirm the most up-to-date information about Form I-765 during this period of transition. Using the wrong version of Form I-765 can result in rejection of your application.**
- ☑ This guide should only be used for **24 - Month STEM OPT application paper filing, not any other type of USCIS application.** If you are replacing a lost, stolen, or incorrect EAD card, please consult an ISO advisor.
- ☑ This guide provides information about various application forms, but the STEM OPT application also requires specific supporting document copies. Please see the following pages for assistance with the I-765 and a full list of materials to include with your STEM OPT application.
- ☑ This document, as well as any other application support from ISO, should not be considered legal advice. You are responsible for accurately completing your forms and timely submitting your application.
- ☑ The information in this guide is updated regularly. We advise that you check the most updated version of this guide on our website.

Form I-765 and official instructions:

<https://www.uscis.gov/i-765>

Please note that **Form I-765 must always be submitted with appropriate supporting documentation**. Consult the ISO's [STEM OPT Application Checklist](#) for more information about this documentation.

We highly recommend filling out this form electronically (typing in the information). If you must fill any sections out by hand, use black ink and write clearly.

Check this box. STEM OPT is a separate employment permission from 12-month OPT and uses a new eligibility category, so it is not considered a renewal.

Enter your **full name** as it appears on your passport. If your full name does not fit in these boxes, you can use Part 6: Additional Information (page 7) to write out your full name.



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

For USCIS Use Only	<input type="checkbox"/> Authorization/Extension Valid From	Fee Stamp	Action Block
	<input type="checkbox"/> Authorization/Extension Valid Through		
	Alien Registration Number A- [] [] [] [] [] [] [] [] [] []		
Remarks			
To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).		<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney or Accredited Representative USCIS Online Account Number (if any) [] [] [] [] [] [] [] [] [] []

▶ **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.

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.)

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 [] [] [] [] [] [] [] [] [] []

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 [] [] [] [] [] [] [] [] [] []

USCIS released a new version of Form I-765 that must be used starting August 25, 2020. Note the current edition date in the bottom left (8/25/20). In case of sudden changes, make sure to download the most recent version of the form from the USCIS website for your application.

Leave this section blank.

Enter N/A in any fields that do not apply to you throughout the application.

You can use this section if you have ever changed your name OR if your name appears differently on different legal documents (e.g. your names are in a different order, with a dash [-], with or without an extra space, etc). If this does not apply to you, enter N/A in any unused fields.

The address you enter here is where your EAD card and any other notices from USCIS will be mailed. **This should be an address where you can securely receive mail for the next 6 months.**

If the mailing address you are using is different from where you live, select **"No"**. If the mailing address you are using is the same as your physical address, select **"Yes"**.

If you selected **"No"** in #6, fill in your **current residential address here**.

[Some students have issues with the fillable PDF not working for this section—if you are not able to type this in, you can use a text box or neatly hand-write in black ink after printing your forms.]

You can enter the 9-digit **"USCIS #"** on your current EAD card as your **"A-Number"**. Most students do not have a USCIS Online Account Number, and that can be left blank.

Answer #10, #11, & #13a appropriately based on your personal circumstances. In #12 you can select **"Yes"**.

If you have a **Social Security Number**, enter that into #13b.

Part 2. Information About You (continued)

Your U.S. Mailing Address

- 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
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.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)
▶
10. Gender ☐ Male ☐ Female
11. Marital Status
☐ Single ☐ Married ☐ Divorced ☐ Widowed
12. Have you previously filed Form I-765? ☒ Yes ☐ No
- 13.a. Has the Social Security Administration (SSA) ever officially issued a Social Security card to you? ☐ Yes ☐ No
- 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).
▶

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 already have a Social Security Card and have not lost it, you can select **"No"** in #14 and skip to #18a.

If you have never had a Social Security Number or have lost your official Social Security Card, you can select **"Yes"** in #14. [Being approved for OPT automatically makes you eligible for a Social Security Number, so you can apply for one along with your OPT application. Your Social Security Card will be sent to the mailing address used for this application.]

If you select **"Yes"** in #14, fill in #15—17b. These questions are only for the Social Security Number application.

List your **country of citizenship** in #18a.

If you have dual citizenship, list your second country of citizenship in #18b. If you do not have dual citizenship, you can enter N/A in #18b.

Fill in #19a - 19c appropriately. If State/Province does not apply to you, you can enter N/A.

Fill in your date of birth.

Enter your I-94 admission number.

Enter your current passport number.

Enter the country that issued your passport and your passport expiration date.

Enter the date of your last arrival to the United States and the Port of Entry where you passed through US Customs.

Enter your immigration status history.

Enter your SEVIS ID number (listed on your I-20).

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)

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)

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)).
() () ()

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 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.
N/A

30. (c)(8) Eligibility Category. If you entered the eligibility category (c)(8) 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.
N/A

30.b. Did you enter the United States lawfully through a U.S. Port of Entry? (If "No," enter explanation in Part 6: Additional Information.)
Yes No

See the next page of this guide for information about #27 - 28c.

You will need to look up your most recent I-94 record and travel history online in order to complete #21a, #22, and #23. Your most recent I-94 should ideally reflect your most recent entry to the United States. However, if you took a short trip to Canada, Mexico, or an island near the United States, your I-94 record may not have been updated. This travel should be reflected in your travel history and/or you should have a Port of Entry stamp in your passport from when you passed through United States Customs. If your I-94 record and travel history do not match, fill in #21a, #22, and #23 based on the available I-94 record and your actual travel dates and then use Part 6: Additional Information (page 7) to provide explanation. Talk to an ISO advisor for further guidance.

Students who do not have a passport may have a travel document. If this is the case for you, enter your travel document # in #21c. If not, enter N/A.

Your answer to #24 may be different from #25 if you changed your status inside the United States via a Form I-539 application and have not traveled internationally since.

Link to look up your I-94 record online:
<https://www.cbp.gov/i-94>

Leave blank.

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

Fill in your employer name exactly as listed in E-Verify.

20. Date

Information About Your Last Arrival in the United States

21.a. For

21.b. Pas

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-

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)

Enter this eligibility code for the 24-Month STEM OPT Extension.

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.

► N/A

The I-765 Instructions ask you to fill in the degree level and degree name of your eligible STEM degree in #28a. ISO recommends you list your degree as it appears on your I-20, such as:

EXAMPLE: PhD in Electrical and Electronics Engineering 14.1001

EXAMPLE: Masters in Management Sciences and Quantitative Methods, Other 52.1399

Most students will be unable to fit all of the recommended information into this fillable field. In that case,

you may want to consider: 1) using a free PDF editing software to insert a text/comment box with smaller font, 2) neatly hand-writing this section in black ink after printing, or 3) filling out degree level and either the degree name or CIP code, and then using Part 6 to list the complete information.

Leave blank.

30. (c)(8) Eligibility Category. If you entered the eligibility category (c)(8) in Item Number 27., provide the information requested in Item Numbers 30.a. - 30.g.

30.a. Have you EVER been arrested for, and/or charged with, and/or convicted of any crime in any country?

☐ Yes ☐ No

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

30.b. Did you enter the United States lawfully through a U.S. port of entry and were you inspected and admitted or paroled after inspection by an immigration officer? (If you answer "Yes," you MUST provide evidence of your lawful entry.)

☐ Yes ☐ No

30.c. If you answered "No" to Item Number 30.b., did you present yourself to the Secretary of Homeland Security or his or her delegate (DHS) within 48 hours of entry or attempted entry AND express an intention to seek asylum within the United States or express a fear of persecution or torture in your home country?

☐ Yes ☐ No

See the previous page of this guide for information about #19a - 26.



Part 2. Information About You (continued)	Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature
<p>If you answered "Yes" to Item Number 30.c., provide the following information:</p>	<p>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.</p>
<p>30.d. Date you presented yourself to DHS</p>	<p>Applicant's Statement</p>
<p>30.e. Location where you presented yourself to DHS</p>	<p>NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.</p>
<p>30.f. Country of claimed persecution</p>	<p>1.a. <input checked="" type="checkbox"/> 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.</p>
<p>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.</p>	<p>1.b. <input type="checkbox"/> The interpreter named in Part 4. read to me every question and instruction on this application and my answer to every question in</p>
<p>N/A</p>	<p>N/A a language in which I am fluent, and I understood everything.</p>
<p>N/A</p>	<p>2. <input type="checkbox"/> At my request, the preparer named in Part 5.,</p>
<p>N/A</p>	<p>N/A prepared this application for me based only upon information I provided or authorized.</p>
<p>N/A</p>	<p>Applicant's Contact Information</p>
<p>N/A</p>	<p>3. Applicant's Daytime Telephone Number</p>
<p>N/A</p>	<p>4. Applicant's Mobile Telephone Number (if any)</p>
<p>N/A</p>	<p>5. Applicant's Email Address (if any)</p>
<p>N/A</p>	<p>6. <input type="checkbox"/> Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.</p>
<p>N/A</p>	<p>Applicant's Declaration and Certification</p>
<p>N/A</p>	<p>Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.</p>
<p>N/A</p>	<p>I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.</p>
<p>N/A</p>	<p>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.</p>
<p>N/A</p>	<p>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.</p>
<p>N/A</p>	<p>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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>
<p>N/A</p>	<p>NOTE: If you answered "Yes" to Item Number 31.b., refer to Employment-Based Nonimmigrant Categories, Items 8. - 9., in the Who May File Form I-765 section of the Form I-765 Instructions for information about providing court dispositions.</p>

Please note that you must file Form I-765 from within the US. Please contact an ISO advisor if you have questions or concerns about this.

If you completed Form I-765 by yourself, without the assistance of a legal preparer or attorney, select this option.

Fill in your phone number and an email address where you can be reached for the next 6 months.



Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

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.

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)

N/A

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

N/A

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

N/A

Part 4. Interpreter's Contact Information, Certification, and Signature**Interpreter's Mailing Address**

3.a. Street Number and Name

N/A

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

N/A

3.c. City or Town

N/A

3.d. State

N/A

3.e. ZIP Code

N/A

3.f. Province

N/A

3.g. Postal Code

N/A

3.h. Country

N/A

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

N/A

5. Interpreter's Mobile Telephone Number (if any)

N/A

6. Interpreter's Email Address (if any)

N/A

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and

N/A

which is the same language specified in Part 3., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature

N/A

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

N/A

Sign and date this form in dark blue or black ink after printing
(no gel pen, no digital signatures).



Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

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

N/A

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

N/A

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

N/A

Preparer's Mailing Address

3.a. Street Number and Name

N/A

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

N/A

3.c. City or Town

N/A

3.d. State

N/A

3.e. ZIP Code

N/A

3.f. Province

N/A

3.g. Postal Code

N/A

3.h. Country

N/A

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

N/A

5. Preparer's Mobile Telephone Number (if any)

N/A

6. Preparer's Email Address (if any)

N/A

Preparer's Statement

7.a. ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

7.b. ☐ I am an attorney or accredited representative and my representation of the applicant in this case ☐ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Leave blank.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the Applicant's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature

N/A

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

N/A



Part 6: Additional Information of Form I-765 can be used to provide additional information regarding anything you included earlier in the form. **If you do not have anything to add, you may just leave Part 6 blank.**

You can use as many sections of Part 6 as necessary. Start by using #3a-d, then move to #4a-d if necessary, then #5a-d, etc.

Three common reasons students use Part 6 are (1) to **add your full name** if it did not fit above, (2) to **clarify discrepancies between your I-94/travel history**, and (3) to list your **full degree information** if it did not fit above.

Example format: **Clarifying full legal name** that didn't fit in space provided (Page 1, Part 2, Item #1).

Example format: **Clarifying I-94 record/number** that does not match most recent entry to United States (Page 3, Part 2, Item #22).

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. *****EXAMPLE, DO NOT COPY!!!*****

Complete legal name:

Last name: _____

First name: _____

Middle name: _____

4.a. Page Number 4.b. Part Number 4.c. Item Number
 4.d. *****EXAMPLE, DO NOT COPY!!!*****

Public I-94 record system was not updated after most recent travel to Canada. The I-94 record associated with the I-94 number in #21a does not reflect my most recent entry to the United States referenced in #22 and #23.

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

If you are filling out Form I-765 electronically, this section is usually auto-filled (from the name you entered earlier in the form)—if not, be sure to fill it out.

6.a. Page Number 6.b. Part Number 6.c. Item Number
 6.d. *****EXAMPLE, DO NOT COPY!!!*****

Complete degree information:

Bachelor's in Econometrics and Quantitative Economics 45.0603

Example format: **Writing out full level, name, & CIP code of degree** as listed on I-20, if it didn't fit in space provided.

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



Application Materials

All document copies can be in black and white OR in color, as long as they are clear and accurate reproductions of your original documents. Do not send any of your original immigration documents to USCIS.

When filing the paper application, we recommend that you prepare your documents as mentioned on the ISO [website](#). Your application should be assembled in the order the documents are listed below. Documents should be printed single-sided and secured with a paperclip (not stapled).

☑ **FILING FEE**

The filing fee can be paid by personal check, bank check, money order, or credit card. ISO recommends paying by check if possible, due to numerous issues students have had with the credit card authorization form. Please see page 11 of this guide for further details about these options.

☑ **PHOTOS**

2 identical passport – sized printed photos cropped to the appropriate size. **Write your name and A-Number (USCIS #) OR I-94 number on the back of your photos.** Also be sure to **enclose them in a protective covering** (e.g. envelope, Ziploc bag, etc.) to avoid damage during mailing.

☑ **FORM G-1145**

[Form G-1145](#) **E-Notification of Application/Petition Acceptance** is a one-page form that allows you to receive electronic notifications from USCIS about your application. Be sure to list an email address you will be able to access for at least 6 months.

☑ **FORM I-765**

[Form I-765](#) **Application for Employment Authorization** is the application form for OPT and STEM OPT. Make sure to download the most recent version of Form I-765 from the USCIS website for any new application. Please note that Form I-765 requires an **original signature** in **Part 3 #7a.-b.** Sign Form I-765 in dark blue or black ink after printing. USCIS will reject unsigned applications.

☑ **DOCUMENT COPIES:**

- ⇒ Recommendation I-20
- ⇒ Previous CPT and/or OPT I-20s
- ⇒ Passport
- ⇒ I-94 Record
- ⇒ Previous/Current EAD(s)
- ⇒ Supplemental Evidence for STEM OPT: Proof of STEM Degree (and Accreditation Summary, if applicable)

Personal check: Make sure to sign and date the check as you fill it out in pen, see example below:

0025

DATE _____

PAY TO THE ORDER OF **US Department of Homeland Security** \$ **410.00**

Four hundred ten and 00/100 DOLLARS

MEMO _____

Nothing is required in the memo section. You can use it to write your passport name (if it does not appear on the check already) or to write your A-Number or I-94 number, similar to your photos.

AUTHORIZED SIGNATURE _____

Sign the check!

[Form G-1450](#) Authorization for Credit Card Transactions requires an original signature.

Applicant's/Petitioner's/Requester's Information (Full Legal Name)			
Given Name (First Name)	Middle Name (if any)	Family Name (Last Name)	
Credit Card Billing Information (Credit Card Holder's Name as it Appears on the Card)			
Given Name (First Name)	Middle Name (if any)	Family Name (Last Name)	
Credit Card Holder's Billing Address:			
Street Number and Name		Apt. Ste. Flr. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Number
City or Town		State	ZIP Code
Credit Card Holder's Signature and Contact Information:			
Credit Card Holder's Signature		Sign the form after printing!	
Credit Card Holder's Daytime Telephone Number			
		Credit Card Holder's Email Address	
Credit Card Information			
Credit Card Number	Credit Card Type:	Authorized Payment Amount	
	<input type="checkbox"/> Visa	\$.00	
	<input type="checkbox"/> MasterCard		
	<input type="checkbox"/> American Express		
	<input type="checkbox"/> Discover		
Credit Card Expiration Date (mm/yyyy)			