OPT Self-Service Application Information

Use this information if you chose the Self-Service Track in iStart.

Self-Service Application Steps

Step 1. Assemble items on checklist below

Step 2. If you would like to briefly review your application with an advisor after assembling the items on the checklist below, bring all your materials items to Quick Question Advising in Poplars 221 between 1:00 and 3:30 PM. (Meeting with an advisor is optional.)

Step 3. Mail your OPT packet to the appropriate lockbox. (See Preparing & Mailing Your Application, page 14)

Step 4. Wait 2-4 weeks for your OPT Receipt Notice and 2-4 months for your OPT Card.

Step 5. Follow your case status through the “Check Your Case Status” link at www.uscis.gov

Checklist for OPT application

You will need to assemble the following materials for your OPT application. (See Preparing & Mailing Your Application, page 13.)

____ A signed, dated copy of pages 1 and 2 of your new OPT I-20
____ Form I-765, completed and signed. Type/use black ink only. (see Completing the I-765, pages 2-10)
____ Two color, passport-style photographs with your full name and date of birth written on the back in pen (see Additional Application Materials, page 12)
____ Copy of the name & photo page of your passport (including expiration date and any extension pages)
____ Copy of any previous Employment Authorization Documents/OPT cards (front and back)
____ Copy of your most recent I-94 document. This should be one of the following:
  - Paper I-94 card (front and back)
  - Print-out of an electronic I-94
    o Download your electronic I-94 at https://i94.cbp.dhs.gov/. (Please note: do not print the “get travel history” page.) If there are any mistakes or omissions on your I-94, contact OIS before sending your application.
  - Your I-797 Approval Notice (front and back), if you changed your immigration status inside the US and have not departed since that time.
____ Check or money order for $410.00 (U.S. dollars) made payable to “US Department of Homeland Security” (See Additional Application Materials, page 11 for how to complete a personal check) or optional Form G-1450 for payment by credit card
____ Optional: Form G-1145 (If you send this form with your application, you will receive a text or e-mail with your case number when your application is received at the Service Center.)
____ As Applicable: Documentation of previous periods of full-time CPT. An OIS advisor will provide this when you pick up your OPT I-20 if applicable for your situation.

Office of International Services
Poplars 221, 400 E. 7th St., Bloomington, IN 47405
Hours 8:30 AM-4:30 PM, Monday-Thursday, 9 AM – 4:30 PM Friday
Phone: 812-855-9086 (option 2)
E-mail: ois@iu.edu Website: http://ois.iu.edu
Completing the I-765

Type information or use black ink only.

If a question does not apply to you, type or print “N/A” unless otherwise directed. If your answer to a question which requires a numeric response is zero or none, type or print “None” unless otherwise directed.

You can view further instructions on completing the I-765 on the USCIS website.

Part 1. Reason For Applying
1.a. Put a check mark or X in the box “Initial permission to accept employment.”

Part 2. Information About You

Your Full Legal Name
1.a. – 1.c. Enter Family Name, Given Name, and Middle Name (If any)
   • Your name on the I-765, your most recent I-20, and your passport should be the same. If not, notify OIS.

Other Names Used
2.a. – 4.c. This space is for previous legal names or names you are commonly called. If you have no other names, enter “N/A”.

Your U.S. Mailing Address
• This is the address to which your receipt notice and OPT card will be sent. You may use the OIS address, if you like. (Remember to put an address that will be valid for 5 months. If you move, you may change your mailing address with USCIS.)
• If you move before your receipt notice or OPT card are delivered, the documents will not be forwarded to you.
• If there are problems with your application, using the OIS’s address allows us to inquire on your behalf.

5.a. OIS 5.b. 400 E 7th St Poplars 221 5.c. N/A 5.d. Bloomington 5.e. Indiana 5.f. 47405
6. If you use OIS’s address, check “no”.

U.S. Physical Address
7.a. – 7.d. This is the current U.S. address where you are living. (Keep your address updated in One.IU.)

Other Information
8. Enter “none.”

9. If you have a USCIS account number, write it here. If you do not, enter “none.” (Do not create one if you do not already have one.)

10 – 11. Enter current legal gender and current legal marital status

12. If you have ever previously applied for OPT, Severe Economic Hardship, J-2 work authorization, or submitted an I-765 as part of a Permanent Residency application, check “Yes.”

13.a. If you have a Social Security Number, check “Yes.”
13.b. Enter Social Security Number if you have one. If you do not, enter “none.”
   • If you do not have a Social Security Number, you will need one to work while on OPT. For more information, please visit http://ois.iu.edu/living-working/employment/social-security.shtml
14. Check “no” if you have a Social Security Number. Check “yes” if you wish to be issued a Social Security Number
   • If you answer yes, do not use OIS’s address as the U.S. mailing address on your application, as we cannot accept your social security card in the mail. If you have questions about this, please call OIS to schedule an appointment with an international student advisor.

15 – 17.b. Complete if you check “yes” to item #14. Enter “N/A” if you check “no” to item #14.

Your Country or Countries of Citizenship or Nationality
18.a. – 18.b. Enter your country (or countries) of citizenship.
   • If you have more than 2 countries of citizenship or nationality, Part 6 of the I-765 includes space for more information.
## Completing the I-765

### Place of Birth
19.a. – 19.c. Enter your birthplace information. (Make sure information is in the appropriate box)

20. Enter date of birth (American-style dates: mm/dd/yyyy)

### Information About Your Last Arrival in the United States
21.a. Enter information from your most recent I-94 document.
- If you have a paper I-94 card, enter all 11 digits of the Departure Number at the top left corner of the card.
- If you have an electronic I-94 document, enter all 11 digits of the Admission (I-94) Record Number.
  - Please look at the sample electronic I-94 on Additional Application Materials, page 11. If your electronic I-94 is missing any of this information or there are other errors, please contact OIS before sending your application.
- If you changed status within the US and have only an I-797 Approval Notice confirming your F-1 status, enter all 11 digits of the I-94# on the bottom right of the I-797.

21.b. Enter your passport number

21.c. This space should only be completed if you do not have a passport. If you have a passport, enter “none.”

21.d. – 21.e. Enter the country that issued your passport and the expiration date of your passport

22 – 23. Enter the date you last entered the US and the name of the city or airport code where you cleared US customs. (This will not be Bloomington and it is unlikely to be Indianapolis. It may be a special port of entry in another country.)

24 – 25. Enter the immigration status you held when you last entered the US and the immigration status you currently hold. If this is not “F-1,” please contact OIS to make an appointment with an International Student Advisor.

26. Enter your SEVIS Number. This can be found on your I-20.

### Information About Your Eligibility Category
27. Enter a lower case letter c in the 1st set of parentheses, the number 3 in the 2nd set, and the upper case letter B in the 3rd set. When finished, item #27 should look like this: (c) (3) (B)

28.a.-c. Enter “N/A” in these sections.

29-31.a. Enter “none” in these sections.

### Part 3. Applicant’s Statement, Contact Information, Declaration, Certification, and Signature

#### Applicant’s Statement
1.a. Check if you have completed the I-765 on your own.

1.b. – 2 Only check if you have used an interpreter or if someone prepared your application for you.

#### Applicant’s Contact Information
3. Enter your U.S. telephone number.

4. – 5. These are optional


#### Applicant’s Signature
7.a. – 7.b. Sign your name and enter the date (mm/dd/yyyy) you complete the form.

### Part 4. Interpreter’s Contact Information, Certification, and Signature
1.a. – 7.b. Enter “N/A” in these sections.

### Part 5. Contact Information, Declaration, and Signature of Person Preparing this Application, If Other Than the Applicant
1.a. – 8.b. Enter “N/A” in these sections.

### Part 6. Additional Information
If you believe you need to add more information, please call the OIS to schedule an appointment with an international student advisor.
Completing the I-765

This is an example and is for instructional purposes only.

### Application For Employment Authorization

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

<table>
<thead>
<tr>
<th>Authorization/Extension Valid From</th>
<th>Fee Stump</th>
<th>Action Block</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For USCIS Use Only

<table>
<thead>
<tr>
<th>Alien Registration Number</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>A-</td>
<td></td>
</tr>
</tbody>
</table>

To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).

- Select this box if Form G-28 is attached.

<table>
<thead>
<tr>
<th>USCIS Online Account Number (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**START HERE -** Type or print in black ink.

### Part 1. Reason for Applying

I am applying for (select only one box):

- [x] Replacement of lost, stolen, or damaged employment authorization document, or correction of any 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.

- [ ] 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

<table>
<thead>
<tr>
<th>1.a. Family Name (Last Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.b. Given Name (First Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.c. Middle Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

#### 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**

<table>
<thead>
<tr>
<th>2.a. Family Name (Last Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2.b. Given Name (First Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2.c. Middle Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3.a. Family Name (Last Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3.b. Given Name (First Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3.c. Middle Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.a. Family Name (Last Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.b. Given Name (First Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.c. Middle Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>
Completing the I-765

This is an example and is for instructional purposes only.

<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>8. a. In Care Of Name (If any)</td>
</tr>
<tr>
<td>□ DIS</td>
</tr>
<tr>
<td>8. b. Street Number and Name</td>
</tr>
<tr>
<td>□ Apt. □ Ste. □ Fl. [Name]</td>
</tr>
<tr>
<td>8. c. City or Town</td>
</tr>
<tr>
<td>Bloomington</td>
</tr>
<tr>
<td>8. d. State</td>
</tr>
<tr>
<td>IN</td>
</tr>
<tr>
<td>8. e. ZIP Code</td>
</tr>
<tr>
<td>47605</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             |
| 1234 Street Name                        |
| 7. b. City or Town                       |
| Bloomington                              |
| 7. c. State                              |
| IN                                      |
| 7. d. ZIP Code                          |
| 47605                                    |

| **Other Information**                    |
| 9. Alien Registration Number (A-Number) (If any)  
   □ A-NONE                                   |
| 10. USCIS Online Account Number (If any)       
   □ NONE                                     |
| 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.a. Provide your Social Security number (SSN) (If known).** |
| □ ONE                                      |
| **14. Do you want the SSA to issue you a Social Security card?** |
| (You must also answer “Yes” to Item Number 15.)  
   □ 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**                         |
| 16.a. Family Name                        |
| (Last Name)                              |
| 16.b. Given Name                         |
| (First Name)                             |

| **Mother’s Name**                         |
| 17.a. Family Name                        |
| (Last Name)                              |
| 17.b. Given Name                         |
| (First Name)                             |

<table>
<thead>
<tr>
<th><strong>Your Country or Countries of Citizenship or Nationally</strong></th>
</tr>
</thead>
</table>
| 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                                          |
| [Country]                                               |
| 18.b. Country                                          |
| [Country]                                               |

Form I-765 05/31/18
This is an example and is for instructional purposes only.

### 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

City

19.b. State/Province of Birth

State

19.c. Country of Birth

Country

20. Date of Birth (mm/dd/yyyy) 07/17/1997

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

21.a. Form I-94 Arrival-Departure Record Number (if any)

   ▶ 1 2 3 4 5 6 7 8 9 10

21.b. Passport Number of Your Most Recently Issued Passport

A1234567

21.c. Travel Document Number (if any)

None

21.d. Country That Issued Your Passport or Travel Document

Country

21.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy) 01/22/2026

22. Date of Your Last Arrival into the United States, On or About (mm/dd/yyyy) 07/28/2018

23. Place of Your Last Arrival into the United States

CHI

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

P-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)

P-1 Student

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

▶ N-0012345678

### 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, e)(3)(B).

   ( a ) ( 3 ) ( B )

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.e.

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

28.d. Employment or Military Affiliation

28.e. Employment or Military Affiliation (if any)

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.

   ▶ NONE

30. (c)(3) Eligibility Category. If you entered the eligibility category (c)(3) in Item Number 27., have you EVER been arrested for and/or convicted of any crime?

   □ Yes □ No

NOTE: If you answered “Yes” to Item Number 29., 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.

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 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.

   ▶ NONE

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?

   □ Yes □ No

NOTE: If you answered “Yes” to Item Number 29.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.
Completing the I-765

This is an example and is for instructional purposes only.

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
   9128590086

4. Applicant's Mobile Telephone Number (if any)
   [ ] N/A

5. Applicant's Email Address (if any)
   Email Address

6. [ ] Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ARC settlement agreement.

Applicant's Declaration and Certification

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.

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.

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

7.b. Date of Signature (mm/dd/yyyy) 08/30/2018

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 |  |
| 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 | NONE |
| 5. Interpreter’s Mobile Telephone Number (if any) | NONE |
| 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 [language], 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) | NONE |

### 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.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 | NONE |
| 5. Preparer’s Mobile Telephone Number (if any) | NONE |
| 6. Preparer’s Email Address (if any) | N/A |
Completing the I-765

This is an example and is for instructional purposes only.

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

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 ay need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

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

□ [Signature]

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

Form I-765 05/31/18
Completing the I-765

This is an example and is for instructional purposes only.

<table>
<thead>
<tr>
<th>Part 6. Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

1.a. Family Name
(First Name)  
Family Name

1.b. Given Name
(First Name)  
Given Name

1.c. Middle Name  
N/A

2. A-Number (if any)  
[ ] 0  [ ] 1  [ ] 2  [ ] 3  [ ] 4  [ ] 5  [ ] 6  [ ] 7  [ ] 8  [ ] 9  [ ]

3.a. Page Number  
3

3.b. Part Number  
2

3.c. Item Number  
27

3.d. Please see attached for evidence of previously authorized CPT.

4.a. Page Number  

4.b. Part Number  

4.c. Item Number  

4.d.  

5.a. Page Number  

5.b. Part Number  

5.c. Item Number  

5.d.  

6.a. Page Number  

6.b. Part Number  

6.c. Item Number  

6.d.  

7.a. Page Number  

7.b. Part Number  

7.c. Item Number  

7.d.  

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Form I-765  05/31/18  Page 7 of 7
Additional Application Materials

How to Complete a Personal Check

★ = mandatory

The address on your check must be your current address. If the address printed on the check is no longer correct, please draw a line through old information and write correct information to the side.

Electronic I-94

Please do not submit your application before contacting OIS if:

• Your personal information / date of entry / class of information (immigration status) is incorrect in any way, OR
• You are missing the “D/S” notation

Your I-94 may need to be corrected by CBP, and this correction should take place before submitting the OPT application.

(Please note: Do not print the page that appears when you click, “Get Travel History.”)
Guidelines for the “Two Passport Style” photos

You can get passport-style photos taken at OIS, FedEx, the US Post Office, some private shipping companies, and some banks.

- Photos should be taken inside the US and within the 30 days before OPT application submission. *Photos used for obtaining a non-US passport or a US visa stamp are generally not acceptable, as they are often not the correct size, and rarely taken within 30 days of the OPT application.*

- Hats or head coverings permissible only if worn daily for religious purposes. Your full face must be visible and your head covering cannot cast shadows on your face.

- Head should be positioned directly facing the camera.

- Photo should capture from slightly above top of hair to middle of chest.

- Background should be plain white or off-white.

- To view examples of passport-style photos online, visit: [http://travel.state.gov/content/passports/english/passports/photos/photos.html](http://travel.state.gov/content/passports/english/passports/photos/photos.html)

Write your full name and date of birth on the back of both pictures in pen (example above). Be careful to make sure the ink is dry before proceeding.
Preparing & Mailing Your Application

Before you mail your application to the USCIS, the documentation will need to be arranged in a specific order.

- Sign and date page one of your new OPT I-20 where indicated.
- Copy page 1 and 2 of the OPT I-20 after you have signed and dated it.
  - Keep the original and the copy will go in your application packet.
- Assemble the OPT application in the following order:
  1. G-1145 (optional first page)
  2. Pages one - seven of the I-765 (include all seven pages)
  3. Copy of page two of your new I-20 (directly behind/after I-765)
  4. Copy of page one of your new I-20 (directly behind/after page two of I-20)
  5. Copy of your passport identity page (directly behind/after page one of I-20)
  6. Copy of your most recent I-94 document (directly behind/after passport page)
     - If you have a paper I-94 card (white card, stapled in passport), insert a copy of front & back of card
     - If you have an electronic I-94 document, print out that page
     - If you changed your visa status inside the US and have not departed since that time, insert a copy of both front & back of the I-797 Approval Notice
  7. If you have participated in CPT at this current degree level, you also need to include:
     - Copy of the SEVIS screenshot showing your previous CPT
     - Copy of the date calculator showing CPT participation, if applicable
  8. Put your 2 passport-style photos (with your full name and date of birth written on the back of each picture in pen) in a small plastic bag and then staple this bag to the top right corner of the I-765 only
  9. Staple your check/money order ($410 made payable to “US Department of Homeland Security”) to the top center of your I-765 only
  10. Staple the entire packet together in the top left corner
### Preparing & Mailing Your Application

<table>
<thead>
<tr>
<th>If the address you listed in #5 on the I-765 is in one of these states:</th>
<th>Mail your application to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alaska, Arizona, California, Colorado, Guam, Hawaii, Idaho, Illinois, <strong>Indiana</strong>, Iowa, Kansas, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, North Dakota, Ohio, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming, or Commonwealth of the Northern Marina Islands</td>
<td><strong>USCIS PHOENIX LOCKBOX</strong></td>
</tr>
<tr>
<td></td>
<td>If you want to use the US Postal Service (USPS)*</td>
</tr>
<tr>
<td></td>
<td>USCIS</td>
</tr>
<tr>
<td></td>
<td>PO Box 21281</td>
</tr>
<tr>
<td></td>
<td>Phoenix, AZ 85036</td>
</tr>
<tr>
<td></td>
<td>If you want to use a private company (FedEx, UPS, DHL, etc.)</td>
</tr>
<tr>
<td></td>
<td>USCIS</td>
</tr>
<tr>
<td></td>
<td>Attn: AOS</td>
</tr>
<tr>
<td></td>
<td>1820 E. Skyharbor Circle S</td>
</tr>
<tr>
<td></td>
<td>Suite 100</td>
</tr>
<tr>
<td></td>
<td>Phoenix, AZ 85034</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If the address you listed in #5 on the I-765 is in one of these states:</th>
<th>Mail your application to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama, Arkansas, Connecticut, Delaware, DC, Florida, Georgia, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Mississippi, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Oklahoma, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, Tennessee, Texas, Vermont, Virginia, U.S. Virgin Islands, or West Virginia</td>
<td><strong>USCIS DALLAS LOCKBOX</strong></td>
</tr>
<tr>
<td></td>
<td>If you want to use the US Postal Service (USPS)*</td>
</tr>
<tr>
<td></td>
<td>USCIS</td>
</tr>
<tr>
<td></td>
<td>PO Box 660867</td>
</tr>
<tr>
<td></td>
<td>Dallas, TX 75266</td>
</tr>
<tr>
<td></td>
<td>If you want to use a private company (FedEx, UPS, DHL, etc.)</td>
</tr>
<tr>
<td></td>
<td>USCIS</td>
</tr>
<tr>
<td></td>
<td>Attn: AOS</td>
</tr>
<tr>
<td></td>
<td>2501 S. State Hwy 121</td>
</tr>
<tr>
<td></td>
<td>Business Suite 400</td>
</tr>
<tr>
<td></td>
<td>Lewisville, TX 75067</td>
</tr>
</tbody>
</table>

* If you choose the USPS, we advise purchasing a tracking number for your package.
Preparing & Mailing Your Application

1. Your check or money order for $410

2. Your 2 passport-style photos (with full name and date of birth on back in pen) in a small plastic bag

3. Copy of your passport ID page

4. I-94

5. OPT I-20 passport ID page

6. OPT I-20

7. I-765

8. p. 2 of your OPT I-20

9. p. 1 of your OPT I-20

10. Copy of passport ID page

11. Your CPT screens (if applicable)

(Optional First/Top Page: G-1145)