

## Form I-765 Aid

This document is intended to serve only as a supplemental general reference for F-1 students completing Form I-765 as part of their application for the initial period of F-1 Post-Completion Optional Practical Training (OPT). Please be advised that this document only offers general guidance on how to complete the form and does not constitute legal advice. Furthermore, preparing and submitting a truthful and properly completed I-765 and full supporting application materials is your responsibility. Adjudication and processing times are determined by USCIS. OIS disclaims any and all liability for unfavorable adjudications.

This document provides additional explanation and insight for certain items on the I-765 as they apply to the F-1 OPT process. Be certain to review the USCIS' [I-765 instructions](#) carefully. Occasionally, USCIS makes updates to their forms so it is important that you compare the version of the form I-765 you are completing to the form that is reviewed on this aid (5/31/2018 edition) to make sure you answer the questions accurately and don't overlook any new questions added to a newer version of the form.

### General tips:

- Complete the I-765 online, then print it single-sided. Do not staple pages; use a paper clip instead.
- Sign it in **black** ink – electronic signatures and signatures other than in black ink will not be accepted by USCIS.
- Your passport-style photos should be recent. Write your name and your SEVIS ID number *gently* on the back. For additional guidance on photos, refer to the [I-765 instructions](#) provided by USCIS.
- Attach your payment of \$410 to the top of the packet with a paper clip. Any of these forms of payment are acceptable:
  - Personal check (your own or from someone else's account)
    - Made out to 'U. S. Department of Homeland Security'
    - Signed by the account owner
  - Money order (from CVS, 7-11, etc.)
    - Made out to 'U. S. Department of Homeland Security' in the 'payable to' section
  - Cashier's check (from a bank)
    - Made to 'U. S. Department of Homeland Security' in the 'payable to' section
  - [G-1450](#) Authorization for Credit Card Transactions
    - NOTE: we have seen more problems with this payment method than with the others, due to a higher chance of errors
    - Be very careful that it is filled out completely and accurately
    - Make sure it is signed by the owner of the credit card account
    - US banks only
- If you have ever had a different SEVIS ID # from JHU or another school, list it on page 7
- List any and all previous CPT or OPT on page 7

[USCIS instructions](#) for answering questions on the I-765: Answer all questions fully and accurately. 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 numerical response is zero or none, type or print "None" unless otherwise directed.

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

**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.)

Select 1.a. For initial (i.e., not STEM extension) OPT, 1.a. will be checked

**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

This should be your name as it appears on your I-20 and your passport. If these do not match, please consult OIS.

**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

Complete this section, if applicable. Examples may include prior legal names, names used prior to marriage, names used on diplomas or drivers licenses, etc. If it does not apply, put N/A.

**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   
(USPS ZIP Code Lookup)

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.

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5.a.-5.e.: the I-797c (receipt notice) and EAD will be delivered ONLY to *Your U.S. Mailing Address* listed here. If you expect to be at this address long enough to receive your card within USCIS' processing time (typically 3-5 months), use your current address.

If you are thinking about moving, or you are unsure of where you will be living in 3-5 months, it may be best to put a trusted friend/relative's address in *Your U.S. Mailing Address*. USCIS does not allow the U.S. Post Office to forward mail to any address other than what USCIS has on file. In this case:

- 5.a.-5.e.: Put the name and address of the trusted person and;
- Answer NO to 6 and;
- Put your current physical address in 7.a.-7.d.

6.: if *Your U.S. Mailing Address* is the **same** as your *U.S. Physical address*, answer YES to 6 and skip 7.a.-7.d.

You will send your application materials to the USCIS service center. See filing address here: <https://www.uscis.gov/i-765-addresses>

8. Leave this blank.

9. Leave this blank.

Answer 10-13a.

**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

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- If you have an SSN, enter it in 13.b., answer NO to 14, and skip to 18a.
- If you do not have an SSN and would like to apply for one, answer YES to 14 and complete the rest of the questions on page 2 of Form I-765.
  - Your Social Security card will be delivered to your US Mailing Address. You should receive it within 2 weeks of receiving your EAD.

Fill this section out. If you indicate that you are a citizen of multiple countries, you should include copies of your passport from each country in the application. The country in 18.a. should match the country of citizenship on your I-20. If you only have one country of citizenship, enter N/A in 18.b.

**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  
[Text Box]

19.b. State/Province of Birth  
[Text Box]

19.c. Country of Birth  
[Text Box]

20. Date of Birth (mm/dd/yyyy) [Text Box]

Complete *Part 2. Information About You (continued)* in its entirety. Below are comments on commonly asked questions we receive from students.

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

21.a. Form I-94 Arrival-Departure Record Number (if any)  
▶ [Text Box]

21.b. Passport Number of Your Most Recently Issued Passport  
[Text Box]

21.c. Travel Document Number (if any)  
[Text Box]

21.d. Country That Issued Your Passport or Travel Document  
[Text Box]

21.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy)  
[Text Box]

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)  
[Text Box]

23. Place of Your Last Arrival Into the United States  
[Text Box]

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

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)  
[Text Box]

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)  
▶ N- [Text Box]

21.a. This can be found on your printed I-94 from [cbp.gov/i94](http://cbp.gov/i94)

21.b. It's okay if your visa is in an old passport. Enter your current, most RECENT passport number.

21.c. You can leave this blank; your passport information will be sufficient.

22. This can be found on your printed I-94 from [cbp.gov/i94](http://cbp.gov/i94)

23. Enter the city where you went through U.S. immigration processing.

24. and 25. Check your I-94. Your status should be *F-1 Student*. If not F-1, consult OIS.

26. This is the number beginning with "N00" on the upper left corner of your I-20. It will not change when OIS issues the OPT I-20.

**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)).

(  ) (  ) (  )

27. Input category (c) (3) (b) for your initial period of post-completion OPT.

Leave 28-31.b. leave blank. These questions are only for OPT STEM Extension and other types of requests, not initial OPT requests.

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.

▶

30. **(c)(8) Eligibility Category.** If you entered the eligibility category (c)(8) 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 30.**, 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 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.

▶

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 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.

**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.

Select 1.a. if you read and prepared this form yourself.  
  
OR  
  
Select 1.b. if someone translated the I-765 for you.  
  
Check the box for 2 if someone else prepared the I-765 for you.

**Applicant's Contact Information**

- 3. Applicant's Daytime Telephone Number
- 4. Applicant's Mobile Telephone Number (if any)
- 5. Applicant's Email Address (if any)
- 6.  Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Put your contact information here. It is a good idea to use a non-JHU email address if you will not continue to have access to your JHU email after you complete your degree program.



**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, 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.

You must sign in black ink by hand. DO NOT use an electronic signature.

**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)

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

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

This can be left blank unless you completed the form with the help of an interpreter. For more information, see the next page.

Page 5 and 6 only need to be completed if you selected 1.b. or 2 in part 4. If an OIS advisor reviewed your OPT application, you will still leave these pages blank. OIS advisors are not official preparers for OPT application purposes. Although these pages are blank, you still must include them in your packet. If you think these pages are applicable to you, please ask an OIS advisor.

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

*Interpreter's Mailing Address*

3.a. Street Number and Name

3.b.  Apt.  Ste.  Flr.

3.c. City or Town

3.d. State  3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

*Interpreter's Contact Information*

4. Interpreter's Daytime Telephone Number

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

6. Interpreter's Email Address (if any)

*Interpreter's Certification*

I certify, under penalty of perjury, that:  
 I am fluent in English and  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

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

**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)

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

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

*Preparer's Mailing Address*

3.a. Street Number and Name

3.b.  Apt.  Ste.  Flr.

3.c. City or Town

3.d. State  3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

*Preparer's Contact Information*

4. Preparer's Daytime Telephone Number

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

6. Preparer's Email Address (if any)

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

*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 attorney 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

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

On page 7 of Form I-765 you should enter additional information if any of the following apply:

- if you answered yes to number 12 on page 2 of Form I-765
- if you've ever had another SEVIS ID number (F-1 or J-1 program)
- if you have done **ANY** Curricular Practical Training (CPT) regardless of degree level or university you attended

If more than one of these items pertain to you, it does not matter the order in which you report this information on page 7. What is important is that you are forthcoming with your information. If none of these apply to you, you do not have to fill anything out, but you must still include this page in your application package.

**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.

4.a. Page Number  4.b. Part Number  4.c. Item Number

4.d.

**If you answered yes to number 12 on page 2 of Form I-765:**

you must provide details on this page. Be sure to include dates, and degree level (Bachelor/Master). For all approved OPT, you must include a copy of each prior EAD with your packet. If you submitted the I-765 but USCIS did not approve the OPT, include the receipt number for your case and explain what happened.

Enter the following in the designated boxes:

- 3.a.: 2
- 3.b.: 2
- 3.c.: 12
- 3.d.: Provide an explanation

**Sample Language:**

Prior OPT authorization [enter start date – end date] for [indicate level]

*I applied for OPT for the master's level, but I decided to transfer to JHU so I withdrew my application.*

**If you've ever had another SEVIS ID number (F-1 or J-1 program):**

If you studied in the US at a different school and **did not transfer** your record to JHU, OR if you were here in the J-1 visa category, you would have another SEVIS number. If you do not have any documents with your prior SEVIS number, look at your F or J VISA. Be sure to list the degree level. It is not necessary to include copies of old documents to support this information.

Enter the following in the designated boxes:

- 4.a.: 3
- 4.b.: 2
- 4.c.: 26
- 4.d.: Provide an explanation

**Sample Language**

Prior SEVIS ID [enter ID] for Summer Intensive Program.

Prior SEVIS ID [enter ID] for J-1 program

Prior SEVIS ID [enter ID] for high school program

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



**If you have ever received a CPT authorization:**  
Since the I-765 does not ask questions specifically about CPT, you may leave the Page Number, Part Number, and Item Number blank. You should report if it was full time (FT) or Part-Time (PT), the dates and the degree level. If you have copies of your CPT I-20s, include those with the packet. If you do not have copies, mention that in the remarks.

5.d.: Provide an explanation

**Sample Language**  
*FT CPT 06/01/2019-08/15/2019 for Bachelor's*  
*PT CPT 10/05/2019-12/02/2019 for Master's*

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.					