Form I-765 Visual Completion Guide:
STEM OPT Extension

Updated March 2021.

This guide will help you complete Form I-765: Application for Employment Authorization, which you will print and submit to U.S. Citizenship and Immigration Services (USCIS) as part of your STEM OPT application packet. Please refer to the ISSS STEM OPT Application Checklist for the full list of required documentation.

If you are not applying for STEM OPT, please see our Form I-765 Visual Completion Guide for Pre- and Post Completion OPT.

Tips and Reminders

1. To ensure that you are using the most recent version of Form I-765, please download the form from the USCIS website at: https://www.uscis.gov/i-765.

2. This guide is a general overview of Form I-765 and should not be taken as official legal guidance. Your form may look different from our sample depending on your specific situation.

3. Please type your responses to each question. Where it is not possible to type, or where your response exceeds the character limit, clearly hand-write your answers in black ink.*

4. Some questions may not apply to you. For such questions, please write “N/A” or “NONE” in black ink on the printed form unless otherwise directed.

5. Include all pages of Form I-765 along with your application (even blank pages). Do not print double-sided.

6. You must sign the document in black ink.* E-signatures are not acceptable!

7. If you need more detail on a particular question, please see USCIS’ line-by-line Form I-765 Instructions.

8. ISSS is not responsible for any errors, inaccuracies, or incomplete information supplied on your Form I-765.

Note: All names, contact information and other biographical details provided in this sample are for demonstration purposes only. Any resemblance to actual persons at Penn or otherwise is purely coincidental.

* If you already submitted your I-765 with blue ink, there is no need to re-submit or take any action.
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. [x] 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) [x]
1.c. Middle Name [ ]

Be sure a barcode appears at the bottom of each page of your Form I-765.

STEM OPT applicants should check only this box.

Enter your name as it appears on your passport. Make sure your first and last name are listed in the correct order!

Leave this blank if you do not have a middle name. Do not write N/A.

Write None or N/A in each field if you have not used another name.
**Part 2. Information About You** (continued)

<table>
<thead>
<tr>
<th>Your U.S. Mailing Address (USPS ZIP Code Lookup)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.a. In Care Of Name (if any)</td>
</tr>
<tr>
<td>5.b. Street Number and Name</td>
</tr>
<tr>
<td>3925 Walnut St</td>
</tr>
<tr>
<td>24</td>
</tr>
<tr>
<td>5.d. City or Town</td>
</tr>
<tr>
<td>Philadelphia</td>
</tr>
<tr>
<td>5.e. State FA</td>
</tr>
<tr>
<td>5.f. ZIP Code 19104</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.

<table>
<thead>
<tr>
<th>U.S. Physical Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.a. Street Number and Name</td>
</tr>
<tr>
<td>7.c. City or Town</td>
</tr>
<tr>
<td>7.d. State</td>
</tr>
<tr>
<td>7.e. ZIP Code</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Information</th>
</tr>
</thead>
</table>
| 8. Alien Registration Number (A-Number) (if any)
- A- 1 2 3 4 5 6 7 8 9                         |
| 9. USCIS Online Account Number (if any)        |
| ☑ NONE                                         |
| 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 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
Latvia
18.b. Country
N/A

**If Yes, include copies of previous EADs with your application or provide an explanation in Part 6 (“Additional Information”).**

**If Yes (you have been issued a Social Security Card and do not need a replacement):** Enter your SSN in 13.b., answer “No” to 14., leave 15.-17. blank.

**If No (no Social Security Card or need a replacement):** Leave 13.b. blank, answer Yes to 14.-15., complete 16. and 17.

**If you will use a reliable family member or friend’s address,** enter their full name in 5.a. Leave blank if using own address.

**If your mailing address (5.b.–5.e.) is the same as your physical address (where you are living now),** select “Yes” and leave 7.a.–7.d. blank. Otherwise, fill out 7.a.–7.d.

**This number will be listed under USCIS # on your current OPT EAD card.**

**You must complete 16.-17. if you answered Yes on 14.-15.**

**Provide at least one country where you are a citizen. Do not leave it blank.**

**Answer Yes on 14. if you have never had a Social Security Card or need a replacement.**
Double-check that you entered your birth date in the correct order (month/date/year).

You can find this number on your most recent I-94 at https://i94.cbp.dhs.gov/I94.

Fill out 21.c. if you have an international travel document other than a passport.

You can find this date on your most recent I-94 at https://i94.cbp.dhs.gov/I94.

Include the exact location of your arrival (airport name, pre-clearance location, etc.).

Found in the top left corner of your most recent I-20.

STEM OPT Extension: (c)(3)(C)

For 28.a., enter your degree level and major as listed on your I-20. If you cannot type the full name, you can hand-write it in black ink (but make sure that it fits entirely inside the box!). You can also use Part 6, “Additional Information,” to write the full name of your major.

List your Employer’s Name as it appears in E-Verify. The E-Verify number should be 4-7 digits. Please confirm these with your employer, if necessary.

This section is only to be completed by Eligibility Category (c)(26) – Spouse of an H-1B Nonimmigrant. Do not fill out.

For 29.a., enter your I-94 number. You can find this number on your most recent I-94 at https://i94.cbp.dhs.gov/I94.

Fill out 21.c. if you have an international travel document other than a passport.

You can find this date on your most recent I-94 at https://i94.cbp.dhs.gov/I94.

Include the exact location of your arrival (airport name, pre-clearance location, etc.).

Found in the top left corner of your most recent I-20.
Part 2. Information About You (continued)

If you answered “Yes” to Item Number 30.c., provide the following information:

30.d. Date you presented yourself to DHS

30.e. Location where you presented yourself to DHS

30.f. Country of claimed persecution

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.

Hand-write N/A in each field for this section.

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.

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.

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.

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.

Provide a U.S. phone number where you can be reached (mobile number is acceptable).

Ensure that this email address will be valid for 4-5 months while your application is being adjudicated.

If someone else (e.g., an attorney) helped you prepare Form I-765, hand-write their name here.

Be sure to check the box in 1.a. confirming that you can read and understand English.
Print and sign in black ink. Make sure your signature fits entirely within the box provided.

No e-signatures!

Leave Part 4 blank unless you have been assisted by an interpreter in filling out Form I-765.
Leave this entire section **blank** unless someone (e.g., an attorney or caretaker) has helped you prepare Form I-765. Include this page in your application, even if it is blank!
Part 6 is a space for you to provide information about previous OPT/CPT authorizations, previous SEVIS numbers, additional citizenship countries, etc. Include the exact page, part, and item numbers for each question. If you do not need this page, hand-write “N/A” across this section.

Previous OPT and CPT authorizations refer to Page 3, Part 2, Item 27.

For CPT, include the employer name, full- or part-time status, dates, degree level, and SEVIS ID.

For OPT, include the type (pre-completion or post-completion), full- or part-time status, dates, degree level, and SEVIS ID.

Previous SEVIS ID numbers refer to Page 3, Part 2, Item 26.

For previous SEVIS ID numbers: Include the previous SEVIS ID number, name of the institution, degree level, and program start and end date.

<table>
<thead>
<tr>
<th>Column 1</th>
<th>Column 2</th>
<th>Column 3</th>
<th>Column 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.a. Family Name (Last Name)</td>
<td>Rudnitsky</td>
<td>5.a. Page Number</td>
<td>3</td>
</tr>
<tr>
<td>1.b. Given Name (First Name)</td>
<td>Artem</td>
<td>5.b. Part Number</td>
<td>2</td>
</tr>
<tr>
<td>1.c. Middle Name</td>
<td>Danilovich</td>
<td>5.c. Item Number</td>
<td>28.a</td>
</tr>
<tr>
<td>2. A-Number (if any)</td>
<td>▶ A-1 2 3 4 5 6 7 8 9</td>
<td>5.d. Degree</td>
<td>Master’s, Computer Science</td>
</tr>
<tr>
<td>3.a. Page Number</td>
<td>3</td>
<td>6.a. Page Number</td>
<td></td>
</tr>
<tr>
<td>3.b. Part Number</td>
<td>2</td>
<td>6.b. Part Number</td>
<td></td>
</tr>
<tr>
<td>3.c. Item Number</td>
<td>27</td>
<td>6.c. Item Number</td>
<td></td>
</tr>
<tr>
<td>Master’s</td>
<td>N00123456789</td>
<td>7.a. Page Number</td>
<td></td>
</tr>
<tr>
<td>Pre-Completion OPT, Full time</td>
<td>6/1/2019 - 8/27/2019</td>
<td>7.b. Part Number</td>
<td></td>
</tr>
<tr>
<td>Master’s</td>
<td>N00123456789</td>
<td>7.c. Item Number</td>
<td></td>
</tr>
<tr>
<td>4.a. Page Number</td>
<td>3</td>
<td>7.d.</td>
<td></td>
</tr>
<tr>
<td>4.b. Part Number</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.c. Item Number</td>
<td>26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.d. Previous SEVIS Number</td>
<td>N00987654321</td>
<td>DePaul University</td>
<td></td>
</tr>
<tr>
<td>Bachelor’s</td>
<td>8/15/2014 - 5/21/2018</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you could not fit your full degree level and major name in 28.a., you can write it here.

Use these boxes if you need additional space to enter previous SEVIS ID numbers, CPT/OPT authorizations, citizenship countries, full employer name, etc. Leave blank otherwise.