Sample (stem)

Application for Employment Authorization

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

For USCIS Use Only

For USCIS Use Only

Fee Stamp

Attachment Block

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

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 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) [Tanaka]

1.b. Given Name (First Name) [Masako]

1.c. Middle Name [NA]

Other Names Used

Provide all other names you may 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) [NA]

2.b. Given Name (First Name) [NA]

2.c. Middle Name [NA]

3.a. Family Name (Last Name) [NA]

3.b. Given Name (First Name) [NA]

3.c. Middle Name [NA]

4.a. Family Name (Last Name) [NA]

4.b. Given Name (First Name) [NA]

4.c. Middle Name [NA]

Share any other way your name is given on your legal documents. This includes “FNU,” multiple last names you may sometimes use, or previous names you used if you changed your name for any reasons, such as marriage.
## Part 2. Information About You (continued)

### Your U.S. Mailing Address

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<tr>
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<tbody>
<tr>
<td>5.a.</td>
<td>In Care Of Name (if any)</td>
<td></td>
</tr>
<tr>
<td>5.b.</td>
<td>Street Number and Name</td>
<td>576 N Glassell St</td>
</tr>
<tr>
<td>5.c.</td>
<td>Apt.</td>
<td>Ste.</td>
</tr>
<tr>
<td>5.d.</td>
<td>City or Town</td>
<td>Orange</td>
</tr>
<tr>
<td>5.e.</td>
<td>State</td>
<td>CA</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

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<tbody>
<tr>
<td>7.a.</td>
<td>Street Number and Name</td>
<td>NA</td>
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<tr>
<td>7.c.</td>
<td>City or Town</td>
<td>NA</td>
</tr>
<tr>
<td>7.d.</td>
<td>State</td>
<td>NA</td>
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</tbody>
</table>

### Other Information

8. Alien Registration Number (A-Number) (if any)
   
   ![A-123456789]

9. USCIS Online Account Number (if any)
   
   ![NONE]

10. Gender  [ ] Male  [ ] Female


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.

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.

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<tr>
<td>16.a. Family Name (Last Name)</td>
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</table>

### Mother’s Name

Provide your mother’s birth name.

<p>| |</p>
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<tbody>
<tr>
<td>17.a. Family Name (Last Name)</td>
</tr>
</tbody>
</table>

### 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.

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</thead>
<tbody>
<tr>
<td>18.a. Country</td>
</tr>
<tr>
<td>18.b. Country</td>
</tr>
</tbody>
</table>
Part 2. Information About You (continued)

Place of Birth

List the city/town/village, state/province, and country where you were born.

19a. City/Town/Village of Birth

Nagoya

19b. State/Province of Birth

Aichi

19c. Country of Birth

Japan

20. Date of Birth (mm/dd/yyyy)

07/10/1998

Information About Your Last Arrival in the United States

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

1 2 3 4 5 6 7 8 9 1 0

21b. Passport Number of Your Most Recently Issued Passport

T21188829

21c. Travel Document Number (if any)

NA

21d. Country That Issued Your Passport or Travel Document

Japan

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

08/13/2019

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

09/02/2018

23. Place of Your Last Arrival Into the United States

Los Angeles

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

F-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)

F-1 student

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

001234567

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) STEM OPT Eligibility Category. If you entered the eligibility category (c)(3)(C) in Item Number 27, provide the information requested in Item Numbers 28a. - 28c.

28a. Degree

BS Computer Science

28b. Employer’s Name as Listed in E-Verify

Employer name

28c. Employer’s E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

1234567

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)(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.

31a. (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.

NONE

31b. 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 31b, 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.
Sign your name in black ink within the box. This should be an original signature, and cannot be typed or stamped.
### Interpreter’s Contact Information, Certification, and Signature

#### Interpreter’s Mailing Address

<table>
<thead>
<tr>
<th>3.a. Street Number and Name</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.c. City or Town</td>
<td>NA</td>
</tr>
<tr>
<td>3.d. State</td>
<td>NA</td>
</tr>
<tr>
<td>3.e. ZIP Code</td>
<td>NA</td>
</tr>
<tr>
<td>3.f. Province</td>
<td>NA</td>
</tr>
<tr>
<td>3.g. Postal Code</td>
<td>NA</td>
</tr>
<tr>
<td>3.h. Country</td>
<td>NA</td>
</tr>
</tbody>
</table>

#### Interpreter’s Contact Information

4. Interpreter’s Daytime Telephone Number  
   NA

5. Interpreter’s Mobile Telephone Number (if any)  
   NA

6. Interpreter’s Email Address (if any)  
   NA

#### 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  
   NA

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

### 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)  
   NA

1.b. Preparer’s Given Name (First Name)  
   NA

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

#### Preparer’s Mailing Address

<table>
<thead>
<tr>
<th>3.a. Street Number and Name</th>
<th>NA</th>
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<tbody>
<tr>
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<td>NA</td>
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<td>3.e. ZIP Code</td>
<td>NA</td>
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<td>3.f. Province</td>
<td>NA</td>
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<td>3.g. Postal Code</td>
<td>NA</td>
</tr>
<tr>
<td>3.h. Country</td>
<td>NA</td>
</tr>
</tbody>
</table>

#### Preparer’s Contact Information

4. Preparer’s Daytime Telephone Number  
   NA

5. Preparer’s Mobile Telephone Number (if any)  
   NA

6. Preparer’s Email Address (if any)  
   NA
<table>
<thead>
<tr>
<th><strong>Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant (continued)</strong></th>
</tr>
</thead>
</table>

**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.

**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)

[ ]
Complete this section only if:

- You have been approved for CPT in the past
- You have been approved for OPT in the past
- You have used a different SEVIS ID in F-1 status in the US (for example, you attended school for a while, left the US to take a break from school, and returned with a new I-20, you would have a SEVIS ID from your first period of attendance that is different than your current SEVIS ID). Your SEVIS ID is on the top right corner of your I-20, and starts with N00..
- You have to provide additional evidence