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

I-765, Application For Employment Authorization

I	Fee Stamp	Action Block			Initial Receipt	Resubmitted		
	CIS				Relocated			
τ	Jse nly					Received	Sent	
						Com	pleted	
	Application Approved		Application Denied - Failed to establish:			Approved	Denied	
Authorization/Extension Valid From		Eligibi 8 CFR	Eligibility under 8 CFR 274a.12Economic necessity under 8 CFR 274a.12(c)(14), (18)					
	Authorization/Extension Valid To	(a) or ((c)		and 8 CFR 214.2(f)	A #		
5	subject to the following conditions:		Applicant is filing under section 274a.12					
I am applying for: Permission to accept employment. Replacement (of lost employment authorization document). Renewal of my permission to accept employment (attach a copy of your previous employment authorization document).								
1.	Full Name(Family Name)(First Name)(Middle	e Name)	15.	Current	t Immigration Status (Vis	sitor, Student, e	tc.)	
2.	Other Names Used (include Maiden Name)		 Eligibility Category. Go to the " section of the Instructions. In the and number of the eligibility categories instructions. For example, (a)(8), 			space below, place the letter ory you selected from the		
3.	U.S. Mailing Address				1	()()()	
	(Street Number and Name) (Apt. N	Number)	17.	(c)(3)(C	C) Eligibility Category. If you entered the eligibility			
	(Town or City) (State) (ZIP C	ode)	category employe E-Verify		y'(c)(3)(C) in Question 16 above, list your degree, your er's name as listed in E-Verify, and your employer's fy Company Identification Number or a valid E-Verify Company Identification Number in the space below.			
4.	Country of Citizenship or Nationality					oyer's Name as listed in E-Verify		
5.	lace of BirthFown or City)(State/Province)(Country)		Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number					
6.	Date of Birth (mm/dd/yyyy)		18.	(c)(26) I	26) Eligibility Category. If you entered the eligibility			
7.	Gender Male Female			category (c)(26) in Question 16 above, please provide the receipt number of your H-1B principal spouse's most recent Form I-797				
8.	Marital Status	dowed	Notice of Approval for Form I-129).		
9.	Social Security Number (Include all numbers you have ever			Applicant's Signature				
	used, if any)		I certify, under penalty of perjury, that the foregoing is true and correct. Furthermore, I authorize the release of any information that					
10.	Alien Registration Number (A-Number) or Form I-94 Number (if any)			U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the " Who May File Form I-765 ?" section of the instructions and have identified the appropriate eligibility category in Question 16 .				
11.	Have you ever before applied for employment authorization		Sig	nature				
	from USCIS? Yes (Complete the following questions.) Which USCIS Office? Dates			Date of Signature (mm/dd/yyyy) Telephone Number				
	which USCIS Office? Dates		Signature of Person Preparing Form, If Other Than Applicant					
	Results (Granted or Denied - attach all documentation	n)	0				••	
	No (Proceed to Question 12.)		I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.					
12.	2. Date of Last Entry into the U.S., on or about (mm/dd/yyyy)			Signature				
13. Place of Last Entry into the U.S.			Date of Signature (mm/dd/yyyy)					
			Printed Name					
14.	Status at Last Entry (B-2 Visitor, F-1 Student, No Lawfu Status, etc.)	ıl		lress				