

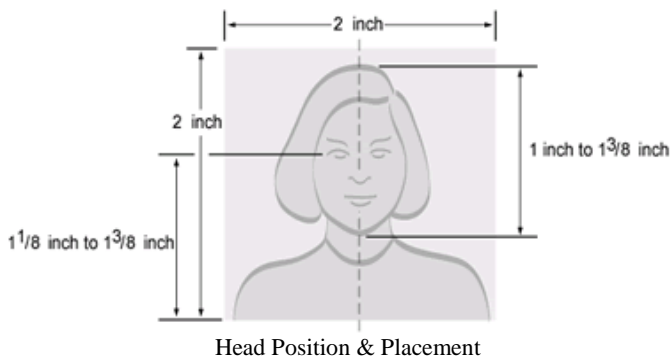
Optional Practical Training STEM Extension Information and Application

Application Instructions

- Email or come into the CIS for information and a packet.
- Prepare your materials and submit them as scanned copies via email to iso01@truman.edu.
 - \$510 check or money order made payable to 'Department of Homeland Security'
 - 2 Passport-style photos with your name and I-94 Number written on the back ***IN PENCIL***. Must be different from your passport, visa, and any other work permit photo. We recommend Walgreens. See below for further specifications.
 - Complete I-765 Form ***TYPED or printed***. Can be found at: <https://www.uscis.gov/sites/default/files/document/forms/i-765-aead.pdf>
See below for sample and instructions.
 - Completed SEVIS Release Form.
 - Copy of your diploma.
 - Letter from your employer including the following:
 - Support of your extension
 - The date you started working
 - Your job title
 - Your duties
 - Completed I-983 Form (<https://www.ice.gov/sites/default/files/documents/Document/2016/i983.pdf>)
 - Page 5 to be completed at a later date:
 - **Evaluation On Student Progress:** To be completed and emailed to nstelter@truman.edu within the first year of OPT STEM
 - **Final Evaluation On Student Progress:** To be completed and emailed to nstelter@truman.edu one week before the end of your OPT STEM
 - All immigration documents.
 - Passport & Visa
 - I-94 (front and back if you have a physical copy or printed page if it is electronic)
 - All previous I-20s and/or DS-2019s
 - All Change of Immigration Status Approval Forms (if any)
 - All previous work permits (including current OPT card)
- Check your email regularly for requests and updates from the CIS regarding your application.

Photo Instructions

- Subject framed with full face, front view, eyes open
- Photo presents full head from top of hair to bottom of chin; height of head should measure 1 inch to 1-3/8 inches (25 mm to 35 mm)
- Head centered within frame (see example below)
- Eye height is between 1-1/8 inches to 1-3/8 inches (28 mm and 35 mm) from bottom of photo
- Plain white or off-white background
- No distracting shadows on the face or background
- Natural expression



USCIS can be very picky about photos, and we want you to have the best chance of being approved, so we are also very picky about photos. Show this to your photographer if you have to, but make sure you get the best photos possible.

Follow the directions on the I-765 form, consulting these specific CIS guidelines for filling out the application:



Application For Employment Authorization

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

USCIS
Form I-765
OMB No. 1615-0040
Expires 07/31/2022

For USCIS Use Only	<input type="checkbox"/> Authorization/Extension Valid From _____	Fee Stamp	Action Block
	<input type="checkbox"/> Authorization/Extension Valid Through _____		
	Alien Registration Number A- <input type="text"/>		
	Remarks		

To be completed by an attorney or Board of Immigration Appeals (BIA)-accredited representative (if any).	<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney or Accredited Representative USCIS Online Account Number (if any) <input type="text"/>
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Part 1

Line 1c. Check ‘Renewal of my permission to accept employment.’”

NOTE: You should include a scan of your EAD card in your application with your other immigration documents.

▶ **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. Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

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

Part 2

Line 1a. and 1b. Family name is followed by all first and middle names as they appear in the machine-readable zone on your passport.

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



Line 5

USCIS will mail your EAD card to this mailing address after you are approved. If you do not know your mailing address for at least 4 months into the future use the CIS address provided.

Line 5a M. CRIST

Line 5b 100 E Normal Avenue

Line 5c Check Ste. and put CIS

Line 5d Kirksville

Line 5e Select MO

Line 5f Put 63501

Line 8 Employment Authorization Number: This is your "A" number found on your Employment Authorization Document (EAD card). It is a nine digit number, Ex: 101-010-101

Line 9 Refer to the USCIS I-765 instructions: Item 9 on page 17. Leave this blank if it does not apply to you.

Line 10 Required

Line 11 Required

Line 12 Check Yes. Provide copies of previous and current EADs with your application. If unavailable, you can explain in Part 6.

Line 13a

Answer Yes if you have an SSN card. Complete 13b and 14 and skip 15-17.

Answer Yes if you had an SSN card and would like a replacement card. Answer Yes to 14 and 15 and complete 16-17.

Line 14 If checked 'No' on line 13a, you may request a social security number in addition to your OPT card. If this is of interest to you, check 'Yes'.

Part 2. Information About You (continued)

Your U.S. Mailing Address (USPS ZIP Code Lookup)

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

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.

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



Line 15 Required if checked 'Yes' on Line 14.

Line 16 Required if checked 'Yes' on Line 14.

Line 17 Required if checked 'Yes' on Line 14.

Line 18 List country (s) of citizenship.

Line 19 Required

Line 20 Required

Line 21a Retrieve your I-94 Number at cbp.gov/I94

Line 21b Required

Line 21d Required

Line 21e Required

Line 22 Enter the last date you entered the U.S. For most of you, this should be the date stamped in your passport and should match your I-94 entry date.

Line 23 Required. (City AND State)

Line 24 F-1 student

Line 25 F-1 student

Line 26 SEVIS number found on Form I-20.

Line 27 (c)(3)(C)

Line 28 Required for STEM Extension application. Enter your major (major CIP code found on I-20), the name of the company, and the company's E-Verify number.

Ask Employer for name and E-verify number if unknown. It is a 6 digit number.

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

Paris

19.b. State/Province of Birth

Ile-de-France

19.c. Country of Birth

France

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

1/20/1999

Information About Your Last Arrival in the United States

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

▶ 0 0 0 1 2 3 4 5 6 7 8

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

60RF19342

21.c. Travel Document Number (if any)

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

France

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

01/20/2024

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

08/20/2018

23. Place of Your Last Arrival Into the United States

Chicago, Illinois

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)

▶ 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, (a)(8), (c)(17)(iii)).

(C) (3) (C)

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 11. 0101

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

Facebook

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

012345

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., provide the information requested in Item Numbers 30.a. - 30.g.

30.a. Have you EVER been arrested for, and/or charged with, and/or convicted of any crime in any country?

Yes No

NOTE: If you answered "Yes" to Item Number 30.a., refer to Special Filing Instructions for Those With Pending Asylum Applications (c)(8) of the Form I-765 Instructions for information about providing court dispositions.

30.b. Did you enter the United States lawfully through a U.S. port of entry and were you inspected and admitted or paroled after inspection by an immigration officer? (If you answer "Yes," you MUST provide evidence of your lawful entry.)

Yes No

30.c. If you answered "No" to Item Number 30.b., did you present yourself to the Secretary of Homeland Security or his or her delegate (DHS) within 48 hours of entry or attempted entry AND express an intention to seek asylum within the United States or express a fear of persecution or torture in your home country?

Yes No



Part 3

Line 1a Check '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.'

Line 3 and 4 Provide a U.S. phone number if available.

Line 5 Provide student email address.

Line 7 Sign and date the form with a pen! Signature should stay **inside** the box.

Page 6 Should be included in application, but does not need to be completed if it does not apply to you.

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.

Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

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.

Page 7, Part 6

Line 1 Fill in last name and first name.

Line 2 Employment Authorization Number: This is your "A" number found on your Employment Authorization Document (EAD card). It is a nine digit number, Ex: 101-010-101

Line 3 Give more information here related to your previous work authorizations (Page Number 2, Part Number 2, Item Number 12).

Include dates and original OPT receipt number found on EAD Card.

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. Previous OPT Authorization:
OPT dates -
Receipt #

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. _____



Sample SEVIS Release Form

Follow these guidelines when filling out your SEVIS Release Form:

Check box for the visa status you currently have

Check box for 'Optional Practical Training (F-1 visa only)'

First line is the start and end dates

- Start date must be within 60 days after graduation
- End date is a year minus a day from the start date

Fill in date of graduation and major

Complete the bottom section on Work Permit

Release of Work Permit information to SEVIS Database

I authorize the Center for International Students to submit the necessary information to the SEVIS database in order to complete my work permit application. I am aware that once the information has been added to the SEVIS database, it cannot be deleted or changed. All information on this form must be completed for the database to be updated. Upon completing the submission of information for a work permit of any type to the SEVIS database, a new I-20 (for F-1 visa) or DS-2019 (for J-1 visa) will be generated. I will return to the ISAO in three days to sign this new form and finalize my work permit application.

I have the following visa status (choose one)

F-1
 J-1
 Other _____

I am applying for one of the following (choose one)

Economic need based off campus work permit (F-1 visa only) Starting Date _____ *

Optional Practical Training (F-1 visa only) From 02/03/20 to 02/02/21 *
Date of Graduation 12/14/2019
Major Business Administration
Please circle one: Part time Full Time

Curricular Practical Training (F-1 visa only)
Name of employer (company) _____
Address of employer _____
Name of supervisor _____
Phone number of supervisor _____
Dates of employment From _____ To _____
Please circle one: Part time Full Time
* Attach job offer letter
* Attach advisor recommendation
* Attach proof of enrollment in internship course

Academic Training (J-1 visa only)
Name of Employer (company) _____
Address of employer _____
Name of supervisor _____
Phone number of supervisor _____
Dates of employment From _____ To _____
Please circle one: Part time Full Time
* Attach job offer letter

Student name (please print) John Smith SEVIS Number N0012345678
Mailing address 100 E. McPherson St. Apt. A, Kirksville, MO 63501
Cell Phone (314) 123-4678 Non-Truman Email johnsmith2019@gmail.com
Student ID 000123456 Truman Email jus6841@truman.edu
Date of Birth 01/23/1998 Signature John Smith Date 09/15/2019

Office Use Only: Student Account & Loan Cleared _____ Applied for graduation? _____ Attended Workshop? _____	Office Use Only: SEVIS DB Updated _____ Date & Initials _____
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Release of Work Permit information to SEVIS Database

I authorize the Center for International Students to submit the necessary information to the SEVIS database in order to complete my work permit application. I am aware that once the information has been added to the SEVIS database, it cannot be deleted or changed. All information on this form must be completed for the database to be updated. Upon completing the submission of information for a work permit of any type to the SEVIS database, a new I-20 (for F-1 visa) or DS-2019 (for J-1 visa) will be generated. I will return to the ISAO in three days to sign this new form and finalize my work permit application.

I have the following visa status (choose one)

- F-1**
 J-1
 Other _____

I am applying for one of the following (choose one)

Economic need based off campus work permit (F-1 visa only) Starting Date _____ *

Optional Practical Training (F-1 visa only) From _____ to _____ *

Date of Graduation _____

Major _____

Please circle one: Part time Full Time

Curricular Practical Training (F-1 visa only)

Name of employer (company) _____

Address of employer _____

Name of supervisor _____

Phone number of supervisor _____

Dates of employment From _____ To _____

Please circle one: Part time Full Time

- Attach job offer letter
- Attach advisor recommendation
- Attach proof of enrollment in internship course

Academic Training (J-1 visa only)

Name of Employer (company) _____

Address of employer _____

Name of supervisor _____

Phone number of supervisor _____

Dates of employment From _____ To _____

Please circle one: Part time Full Time

- Attach job offer letter

* **Processing of Application can take up to 120 days**

Student name (please print) _____ **SEVIS Number** _____

Mailing address _____

Cell Phone _____ **Non-Truman Email** _____

Student ID _____ **Truman Email** _____

Date of Birth _____ **Signature** _____ **Date** _____

Office Use Only:
Student Account & Loan Cleared _____
Applied for graduation? _____
Attended Workshop? _____

Office Use Only:
SEVIS DB Updated _____
Date & Initials



e-Notification of Application/Petition Acceptance

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

USCIS
Form G-1145

What Is the Purpose of This Form?

Use this form to request an electronic notification (e-Notification) when U.S. Citizenship and Immigration Services accepts your immigration application. This service is available for applications filed at a USCIS Lockbox facility.

General Information

Complete the information below and clip this form to the first page of your application package. You will receive one e-mail and/or text message for each form you are filing.

We will send the e-Notification within 24 hours after we accept your application. Domestic customers will receive an e-mail and/or text message; overseas customers will only receive an e-mail. Undeliverable e-Notifications cannot be resent.

The e-mail or text message will display your receipt number and tell you how to get updated case status information. It will not include any personal information. The e-Notification does not grant any type of status or benefit; rather it is provided as a convenience to customers.

USCIS will also mail you a receipt notice (I-797C), which you will receive within 10 days after your application has been accepted; use this notice as proof of your pending application or petition.

USCIS Privacy Act Statement

AUTHORITIES: The information requested on this form is collected pursuant to section 103(a) of the Immigration and Nationality Act, as amended INA section 101, et seq.

PURPOSE: The primary purpose for providing the information on this form is to request an electronic notification when USCIS accepts immigration form. The information you provide will be used to send you a text and/or email message.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information may prevent USCIS from providing you a text and/or email message receipting your immigration form.

ROUTINE USES: The information provide on this form will be used by and disclosed to DHS personnel and contractors in accordance with approved routine uses, as described in the associated published system of records notices [[DHS/USCIS-007 - Benefits Information System and DHS/USCIS-001 - Alien File \(A-File\) and Central Index System \(CIS\)](#)], which can be found at www.dhs.gov/privacy. The information may also be made available, as appropriate for law enforcement purposes or in the interest of national security.

Complete this form and clip it on top of the first page of your immigration form(s).

Applicant/Petitioner Full Last Name	Applicant/Petitioner Full First Name	Applicant/Petitioner Full Middle Name
Email Address		Mobile Phone Number (Text Message)