Need-Based Work Permit Application Packet

Application Instructions
Prepare your application materials and scan them to the CIS at iso01@truman.edu.

1. $510 check or money order made payable to "Department of Homeland Security."
2. 2 Passport-style photos
   - Include 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.
   - See below for further specifications.
3. Completed I-765 Form *TYPED*, following this link with instructions below:
   https://www.uscis.gov/sites/default/files/files/form/i-765.pdf
4. Copies of immigration documents:
   - Passport
   - Visa
   - Port of Entry Stamp in Passport that matches I-94 date
   - I-94
   - Previous I-20s
   - Previous work permits
5. Documentation of the unforeseen financial need
   - **Student Letter** - The student should write and sign a letter addressed to the USCIS asking for approval of a need-based work permit. Include in the letter a statement explaining the reason for the unforeseen financial need and include a table of your income, expenses, and shortfall
   - **Parent/Sponsor Letter** – The parents or sponsor letter written and signed by your financial sponsor with an explanation of the unforeseen need that is beyond their control and resulted in a financial crisis.
     - **Documentation** such as notices, news articles, medical bills, etc. should accompany the application.
     - **Exchange Rate Table** - A table showing the exchange rate between your currency and the U.S. dollar for the last 5 years.
6. Completed SEVIS Release Form.

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

Well-Composed Photos

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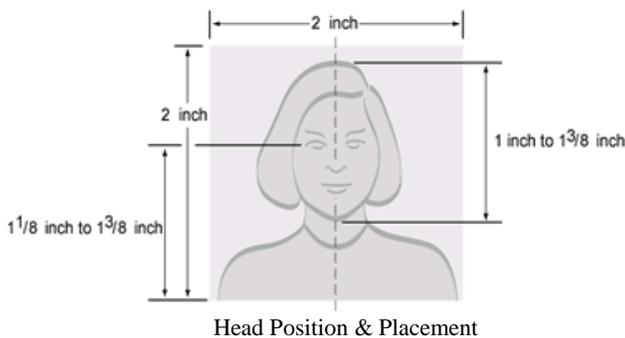
USCIS can be very picky about photos, and we want you to have the best chance of being approved, so we are also very picky about photos. Show this to your photographer if you have to, but make sure you get the best photos possible.

Sample I-765 Form

Follow these guidelines when filling out your application:

***If possible, please download I-765 using Adobe Acrobat Reader.**

Application For Employment Authorization

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

**USCIS
Form I-765**
OMB No. 1615-0040
Expires 05/31/2020

Part 1 Check 'Initial Permission to accept employment'

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

☐ **Authorization/Extension Valid From**	**Fee Stamp**	**Action Block**
☐ **Authorization/Extension Valid Through**		

For USCIS Use Only

Alien Registration Number A-[ ][ ][ ][ ][ ][ ][ ][ ][ ]

Remarks

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

☐ **Select this box if Form G-28 is attached.**

Attorney or Accredited Representative USCIS Online Account Number (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 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.)

Part 2. Information About You

Your Full Legal Name

1.a. Family Name (Last Name) | Smith

1.b. Given Name (First Name) | John

1.c. Middle Name |

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 |

Line 5
USCIS will mail your EAD card to this mailing address after your OPT is 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 Put **Kirksville**

Line 5e Select **MO**

Line 5f Put **63501**

Line 8 This number is listed on your most recent EAD card. It can be found under the "USCIS#" area. If you do not have an EAD or lost it, then you can leave this blank.

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 If you answered "Yes", provide copies of previous EADs with your application, if available. If unavailable, you can explain in Part 6.

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

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

Answer "No" if you were never issued an SSN card. Skip 13b and complete 14-17.

Line 13b Required if checked 'Yes' on Line 13a.

Part 2. Information About You (continued)

Your U.S. Mailing Address

5.a. In Care Of Name (if any)
M. CRIST

5.b. Street Number and Name
100 E NORMAL AVENUE

5.c. ☐ Apt. ☒ Ste. ☐ Flr.

5.d. City or Town
Kirksville

5.e. State MO ▼ **5.f.** ZIP Code 63501
(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.**

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) Smith

16.b. Given Name (First Name) Michael

Mother's Name

Provide your mother's birth name.

17.a. Family Name (Last Name) Jackson

17.b. Given Name (First Name) Sarah

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
France

18.b. Country

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'.

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)(iii)

Line 28-31 Leave Blank

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)   01/20/1999

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)   01/20/2022

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)   08/20/2019

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

Form I-765 12/26/19

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) (iii)

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.

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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!

Page 6-7 Should be included in application, but do not need to be completed if they do 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)

[6607854215]

5. Applicant's Email Address (if any)

[jks1234@truman.edu]

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

➡ [*John Smith*]

7.b. Date of Signature (mm/dd/yyyy) [12/01/2020]

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.

Sample Student Letter

Date

To: USCIS

My family and I are experiencing an unforeseen economic crisis created by the COVID-19 pandemic. I am writing to request approval of an economic need-based work permit so that I may earn funds to pay the part of my educational expenses that my family cannot finance this year.

Due to the pandemic, my parent's business in Nepal has been forced to close for an as yet unknown period of time. Without money coming in, my family cannot pay as much as usual towards my educational expenses. I estimate that I will have a financial short fall of $8490 for the 2020-2021 academic year noted in the table below:

2020-2021 Academic Year Expenses	Income	Shortfall
	$3500 Parents	
$14990 Tuition	$5000 Scholarship	$20,990 Total Costs
$6000 Housing, Food &Other Expenses	$4000 On-campus Employment	$12,500 Total Income
$20,990 Total Expenses	$12,500 Total Income	Shortfall $8,490

I appreciate your time and understanding in this matter.

Sincerely,

Joe Student

Sample Parent/Sponsor Letter

Date

To: USCIS

Please approve a need-based work permit for my child, **NAME**, to allow him to work off campus for part of his tuition. Due to the shutdown of businesses, including mine, in Nepal caused by the COVID-19 pandemic, I am unable to fully finance **NAME**'s education at Truman this year. I am asking that my child be allowed to work off campus to help make up the financial shortfall we are experiencing.

Attached please find the government's notice to all businesses.

Sincerely,

Joe Dad Sr.

Release of <u>Work Permit</u> 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