Do not upload the I-765 to iHawk until:

- you have completed ALL sections
- it has been printed on a printer using black ink
- you have signed/dated the form on pages 4 and 7 using a pen with black ink

ISSS will not create your OPT I-20 until the I-765 is fully and correctly completed.

**SAMPLE FORM FOR COMPLETING THE I-765 for 12-MONTH OPT**

Make sure you are using only the current version of the I-765 found at [https://www.uscis.gov/i-765](https://www.uscis.gov/i-765).

**Part 1. Reason for Applying**

- I am applying for (select only one box):
  - [ ] Initial permission to accept employment.
  - [ ] 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.

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.

**Other Names Used**

- 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

**Enter all variations of names you have used, including nicknames (ex. Lily instead of Liyang), a maiden name before marriage, or any preferred name you might have used at the University of Iowa. If you have no other names, leave blank.**

**Enter your name exactly as it appears in your passport.**
### Fill out only if you checked “YES” for 13.a

13.b. Provide your Social Security number (SSN) (if known)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

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.

### Fill out by checking “YES” only if you checked “YES” for 14 and 15.

#### Father’s Name
Provide your father's birth name.

<table>
<thead>
<tr>
<th>Family Name (Last Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given Name (First Name)</td>
</tr>
</tbody>
</table>

#### Mother’s Name
Provide your mother's birth name.

<table>
<thead>
<tr>
<th>Family Name (Last Name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Given Name (First 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.

<table>
<thead>
<tr>
<th>Country</th>
</tr>
</thead>
</table>

Questions 8 and 9: Most F-1 students will not have an A-Number or USCIS Online Account Number, so these may be left blank if they do not apply to you; if you previously were authorized for OPT, include the A-Number that appeared on your EAD card.
**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
19.b. State/Province of Birth
19.c. Country of Birth
20. Date of Birth (mm/dd/yyyy)

### Information About Your Last Arrival in the United States

21.a. Form I-94 Arrival-Departure Record Number (if any)
21.b. Passport Number of Your Most Recently Issued Passport
21.c. Travel Document Number (if any)
21.d. Country That Issued Your Passport or Travel Document
21.e. Expiration Date for Passport or Travel Document (mm/dd/yyyy)
22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy)
23. Place of Your Last Arrival Into the United States
24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)
25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)
26. Student and Exchange Visitor Information System (SEVIS) Number (if any)
Do not type your name or paste in an electronic image of your signature. Leave this blank until you can print the I-765 on a printer, then sign it using a pen with black ink.

Leave these sections blank.
Leave these sections blank.

Leave these sections blank.
Leave these sections blank.
If your name does not show after the form is printed, handwrite exactly as page 1.

Use Part 6. Additional Information to provide all previously used SEVIS numbers and evidence of any previously authorized CPT or OPT and the academic level at which it was authorized. Include information on all authorized CPT done during this degree program, including start/end dates, full or part time, and employer.

For example:

“Previous SEVIS Number N1234567890”

OR

“Curricular Practical Training”
- 01/20/2017-05/10/2017—Full-Time—
  Master’s Degree—Employer Name
- 06/01/2017-08/01/2017—Part-Time—
  Master’s Degree—Employer Name

OR

“Optional Practical Training”
- 05/25/2015-05/24/2017—Bachelor’s Degree

Using a black ink pen, sign your name and date of signature (MONTH/DAY/YEAR) here.