**Application For Employment Authorization**

**Department of Homeland Security**

**U.S. Citizenship and Immigration Services**

**Form I-765**

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<th>Fee Stamp</th>
<th>Action Block</th>
<th>Signature</th>
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**Mark “Permission to accept employment”**

**Address must be valid for the next four months—do not use a friend’s address!**

You may use the OISS address: 6100 Main St. MS-365 Houston, TX 77005

**Enter I-94 number**

**“Yes” if you have applied for OPT. CPT does not count.**

**Leave blank!**

**Post-completion OPT: (c)(3)(b)**

**Pre-completion OPT: (c)(3)(a)**

**Make sure to sign in blue ink**

**Certification**

I certify, under penalty of perjury, that the foregoing is true and correct. Furthermore, I understand that 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 these instructions for information about providing correct dispositions.

**Date of Signature**

**Signature of Person Preparing Form, If Other Than Applicant**

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.

**Date of Signature**

**Printed Name**

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Form I-765  02/19/17 - N  Page 1 of 2

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Form I-765  02/19/17 - N  Page 2 of 2