



Optional Practical Training: Guide to Completing the I-765 & I-983

International Student and Scholar Services

300 College Park, Rike Center #204
 Dayton, OH 45469-1701
 Ph: (937) 229-2748 • Fax: (937) 229-2766

Completing the I-765

Below are tips for filling out the I-765. Before you begin, pay attention to the following:

- Question 1-8 and 10-16 **must be completed**. Students applying for STEM extension must also complete Question 17. All students can ignore Question 18. Question 9 may be left blank if you do not have a SSN.
- The **Certification** section must be **signed**.
- **Fill out the I-765 electronically**. Do not handwrite the application. I-765s have been rejected due to illegible handwriting. Only the signature should be handwritten.
- **Do not write** in the “For USCIS Use Only” block at the top of Form I-765.
- The illustrations below are **examples**. You will need to use your own information when filling out the form.
- The I-765 is time sensitive:
 - **USCIS must receive your application within 30 days of issuance of the OPT/STEM OPT I-20** (the date printed on the I-20).
 - **For students on standard OPT, USCIS must receive your application no later than the 60th day after completion of your program requirements.**
- Students must apply for the 24-month STEM extension **prior to the expiration of the first 12 months of standard OPT**. The application must be received by USCIS prior to the expiration date of the first EAD. USCIS will not accept I-765 applications for STEM extensions any earlier than 90 days before the current EAD expires. Accordingly, ISSS will not process a STEM recommendation 90 days or more before the EAD expires.

Below are some of the questions on the I-765 and our suggestions.

Next to the words “I am applying for,” check the box:

- “Permission to accept employment” if applying for 12 month OPT; or
- “Renewal of my permission to accept employment...” if applying for STEM extension

I am applying for:	<input type="checkbox"/> Permission to accept employment.	<input type="checkbox"/> Replacement (of lost employment authorization document).
	<input checked="" type="checkbox"/> Renewal of my permission to accept employment (attach a copy of your previous employment authorization document).	

Example above if applying for STEM extension

Question 3. If you live in an apartment, write the abbreviation “Apt.” plus the apartment letter/number next to the street address.
 Example: 123 Main St., Apt. 4B.

If your address will not be valid from the time you send the I-765 until the time you receive the EAD, you may use ISSS’s address: “300 College Park, Rike Center #204, Dayton OH 45469”. ISSS will notify you if/when we receive your mail. This service is provided as a courtesy. ISSS cannot responsible for lost or delayed mail.

Remember:

- This address determines the Lockbox to which you send the I-765 application.
- Mail from USCIS cannot be forwarded.

3. U.S. Mailing Address		
(Street Number and Name)	(Apt. Num)	
300 College Park, Rike Center #204		
(Town or City)	(State)	(ZIP Code)
Dayton	OH	45469

Example if using ISSS’s address



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Question 10. Write the 11-digit number found on your I-94. You can retrieve your I-94 number and travel history from cbp.gov/i94.



Sample I-94 downloaded from cbp.gov/i94

10. Alien Registration Number (A-Number) or Form I-9 (if any)
69000888062

Question #11. If you are applying for STEM extension, mark "Yes".

- **Which USCIS Office?** Write the name of the service center that adjudicated the I-765 application: Nebraska, Texas, California or Vermont. The service center that processed your request is listed on the I-797C Notice of Action. This form was sent to you by USCIS shortly after you submitted the I-765 as confirmation of receipt of your application.
- **Date(s).** Write the start date and end date of the EAD card.
- **Results.** Write "Granted." Include a copy of your previous EAD in the application.

If you are applying for 12 month OPT, mark "No".

11. Have you ever before applied for employment authorization from USCIS?

Yes (Complete the following questions.)

Which USCIS Office?	Dates
Refer to Form I-797C	Refer to EAD
Results (Granted or Denied - attach all documentation)	
Granted	

No (Proceed to Question 12.)

Example if applying for STEM extension

Question #16. Write:

- "(c)(3)(a)" for pre-completion OPT.
- "(c)(3)(b)" for post-completion OPT.
- "(c)(3)(c)" for 24 month STEM extensions.

16. Eligibility Category. Go to the "Who May File Form I-765?" section of the Instructions. In the space below, place the letter and number of the eligibility category you selected from the instructions. For example, (a)(8), (c)(17)(iii), etc.

(c) (3) (c)

Example if applying for STEM extension



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Question #17. Skip this question if you are applying for 12 month OPT.

If applying for STEM extension, write the “CIP code” that corresponds to your major and an abbreviated description of the degree and field. The CIP code can be found on your I-20. See example below:

PROGRAM OF STUDY	
EDUCATION LEVEL MASTER'S	MAJOR 1 Chemical Engineering 14.0701
NORMAL PROGRAM LENGTH 36 Months	PROGRAM ENGLISH PROFICIENCY Required
PROGRAM START DATE 17 OCTOBER 2013	PROGRAM END DATE 31 DECEMBER 2016

CIP Code

- **Employer’s Name as Listed in E-Verify:** Ask your employer to verify the official name as listed in E-Verify. It may differ from the name used in everyday speech.
- **Employer's E-Verify Number:** This is a 4- to 6-digit number the company received when they registered for E-Verify. Do not use a Tax ID number. Ask your company’s HR department for the E-Verify number.

(c)(3)(C) Eligibility Category. If you entered the eligibility category (c)(3)(C) in **Question 16** above, list your degree, your employer's name as listed in E-Verify, and your employer's E-Verify Company Identification Number or a valid E-Verify Client Company Identification Number in the space below.

Degree: 14.0701 MS ChmEng Employer's Name as listed in E-Verify: Ask your employer

Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number: Ask your employer

Certification. Sign your name with black pen. **Make sure your signature is clear and stays within the space provided.** USCIS will take the signature from the I-765 and use it for the EAD card.

Certification

I certify, under penalty of perjury, that the foregoing is true and correct. Furthermore, I authorize the release of any information to U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the “Who May Form I-765?” section of the instructions and have identified the appropriate eligibility category in **Question 16.**

Applicant's Signature John Student

Date of Signature (mm/dd/yyyy) 05/01/2016

Telephone Number Your cellphone number



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Completing the Form I-983

STEM OPT students and their employers are subject to the terms of the Form I-983, Training Plan for STEM OPT Students, effective as of the start date requested for STEM OPT on the Form I-983. Below are helpful tips for completing the I-983 which both student and employer can use. **If you are applying for standard 12 month OPT, this form is not required.**

It is the student's responsibility to submit an accurate and completed I-983 to ISSS 1) to comply with the new STEM regulations and 2) in order to obtain a STEM I-20. The STEM I-20, along with other documents, must be submitted to USCIS to apply for a STEM extension.

Section 1: Student Information (Completed by Student):

- **Student Name:** Enter your full name (Surname/Primary Name, Given Name) exactly as it appears on your I-20.
- **Student Email Address:** Enter the email address where you can be contacted.
- **Name of School Recommending STEM OPT:** Enter "University of Dayton".
- **Name of School Where STEM Degree Was Earned:** Enter "University of Dayton".
- **SEVIS School Code of School Recommending STEM OPT:** Enter "CLE214F10200000".
- **DSO Name and Contact Information:** Enter the full name of the advisor who most recently signed your I-20. For UD contact information, please use the following:
300 College Park, Rike Center #204, Dayton OH 45469
iss@udayton.edu
937-229-2748
- **Student SEVIS ID Number:** Enter your SEVIS identification (ID) number.
- **STEM OPT Requested Period:** Enter the period during which you are requesting to work on STEM OPT (regardless of whether the authorized dates match actual training dates). Note that the STEM OPT extension may not end more than 24 months after the scheduled termination of the student's Employment Authorization Document for the current period of post-completion OPT. For a student on 12-month OPT requesting a STEM OPT extension the start date should be the day after your current 12-month OPT ends. For a student on 17-month STEM OPT requesting conversion to the terms and conditions of a 24-month STEM OPT extension, the F-1 student and the student's employer will be subject to the terms and conditions of the Form I-983 as of the date of receipt at USCIS and thus the requested period should identify a start date on or before proper filing at USCIS.
- **Qualifying Major and Classification of Instructional Programs (CIP) Code:** Enter your STEM major that qualifies you for the STEM OPT extension, as well as the degree's (CIP) code. The following **example** shows where you can find your 6 digit CIP code on your I-20:

PROGRAM OF STUDY		
EDUCATION LEVEL	MAJOR 1	MAJOR 2
MASTER'S	Chemical Engineering 14.0701	None 00.0000
NORMAL PROGRAM LENGTH	PROGRAM ENGLISH PROFICIENCY	ENGLISH PROFICIENCY NOTES
36 Months	Required	Student is proficient
PROGRAM START DATE	PROGRAM END DATE	
17 OCTOBER 2013	31 DECEMBER 2016	

- **Level/Type of Qualifying Degree:** Enter the academic level upon which you are basing STEM OPT. (For example, enter Bachelor's, Master's, or Ph.D.)
- **Date Awarded:** Enter the date when the degree, upon which STEM OPT will be based, was awarded.
- **Based on Prior Degree?** Check "Yes" if your STEM OPT participation is based on a previously-obtained STEM degree, and is not the same degree upon which your current post-



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completion OPT was granted. Check “No” if your STEM OPT participation is based on your most recently obtained degree, and that is the degree upon which your current post-completion OPT is based.

- **Employment Authorization Number:** Enter your “A” number which may be found on the Employment Authorization Document.

Section 2: Student Certification: Review the certification and affirm the statement by signature.

Section 3: Employer Information (Completed by Employer):

- **Employer Name:** Enter your company, university, etc. name.
- **Street Address, Suite, City, State, Zip Code:** Enter the employer or company mailing address.
- **Employer Website URL:** Enter the employer website URL, if available. If no website exists, enter N/A.
- **Employer ID Number (EIN):** Enter the Employer Identification Number (EIN). UD’s EIN is **31-0536715**.
- **Number of Full-Time Employees in the United States:** Provide the number of full-time employees in the United States.
- **North American Industry Classification System (NAICS) Code:** Enter the company’s NAICS code. (Federal statistical agencies use the NAICS code to classify business establishments for the purpose of collecting, analyzing and publishing statistical data related to the U.S. business economy.) NAICS codes are accessible at <http://www.census.gov/eos/www/naics/>
- **OPT Training Hours Per Week:** Enter the agreed-upon number of average training hours per week. In order to qualify for STEM OPT, the student must work a minimum of 20 hours per week.
- **Start Date of Employment:** Enter the date when the student will begin the STEM OPT training with the employer.
- **Compensation:** Enter the dollar amount of salary, stipend, and/or other compensation, and the frequency of pay (per hour, per week, bi-weekly, monthly). Other compensation may include housing, tuition waivers, transportation costs, etc. Note: The terms and conditions of a STEM practical training opportunity (including duties, hours, and compensation) must be commensurate with those applicable to similarly situated U.S. workers, except that a STEM OPT participant must work at least 20 hours per week while employed.

Section 4: Employer Certification: The Employer Official with Signatory Authority, who is an appropriate individual in the employer’s organization, who is familiar with the student’s goals and performance, and who is an employee who has signatory authority for the employer should review the certification and affirm the statement by signature. *Note for Employer Official with Signatory Authority:* The Employer Official with Signatory Authority attestation includes the certification at Section 4 (d) which states “The student on a STEM OPT extension will not replace a full- or part-time, temporary or permanent U.S. worker. The terms and conditions of the STEM practical training opportunity—including duties, hours, and compensation—are commensurate with the terms and conditions applicable to the employer’s similarly situated U.S. workers or, if the employer does not employ and has not recently employed more than two similarly situated U.S. workers in the area of employment, the terms and conditions of other similarly situated U.S. workers in the area of employment.”

Section 5: Training Plan for STEM OPT students (Completed by Employer): In order to better ensure the academic benefit and integrity of the extension, Federal regulations require each STEM OPT student to prepare and execute with *his or her* prospective employer a formal training plan that identifies learning objectives and a plan for achieving those objectives. The STEM OPT student and his or her employer must work together to finalize the plan.



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- **Student Name:** Enter the student's name (Surname/Primary Name, Given Name) exactly as it appears on the student's I-20.
- **Employer Name:** Enter the employer's name, as it appears in "Section 3: Employer Information."
- **Site Name:** Enter the employer's site name, which may be the same as employer name in Section 3. However, if the student is working for a branch or subsidiary of a large entity, or anywhere other than the headquarters, provide the name of this work site.
- **Site Address:** Enter the exact address of the work site where the STEM practical training will take place.
- **Name of Official:** Enter the name of the appropriate individual in the employer's organization who is familiar with, and will monitor, the student's goals and performance. This may or may not be the same Employer Official as in Section 4.
- **Official's Title:** Enter the title of the appropriate individual in the employer's organization who is familiar with, and will monitor, the student's goals and performance.
- **Official's Email:** Enter the email address of the appropriate individual in the employer's organization who is familiar with, and will monitor, the student's goals and performance.
- **Official's Phone Number:** Enter the phone number of the appropriate individual in the employer's organization who is familiar with, and will monitor, the student's goals and performance.
- **Student Role and the Training Program's Direct Relationship to the Student's Qualifying STEM Degree:** Describe what tasks and assignments the student will carry out during the training and how these relate to the student's STEM degree. The plan must cover a specific span of time, and detail specific goals and objectives.
- **Goals and Objectives:** Describe the specific skills, knowledge, and techniques the student will learn or apply; how the student will achieve the goals set out for his or her training; and the training curriculum including the timeline.
- **Employer Oversight:** Explain how the employer provides oversight and supervision of individuals filling positions such as that being filled by the named F-1 student. If the employer has a training program or related policy in place that controls such oversight and supervision, a description of this program or policy may suffice to answer the question.
- **Measures and Assessments:** Explain how the employer measures and confirms whether individuals filling positions such as that being filled by the named F-1 student are acquiring new knowledge and skills. If the employer has a training program or related policy in place that controls such measures and assessments, a description of this program or policy may suffice to answer the question.
- **Additional Remarks.** Provide any additional pertinent information.

Section 6: Employer Official Certification:

- **Certification of Official with Signatory Authority:** *Note: The individual who signs this Certification need not be, but can be, the same individual who signed the Employer Certification in Section 4.* An employee with signatory authority for the employer should review the certification and affirm the statement by signature. On the material change certification (#4), please note that material changes in the plan can include (but are not limited to) the following: any change of Employer Identification Number resulting from a corporate restructuring, any reduction in compensation from the amount previously submitted on the Form I-983, "Training Plan for STEM OPT Students," that is not tied to a reduction in hours worked, any significant decrease in hours per week that a student engages in a STEM training opportunity, and any decrease in hours below the 20-hours-per-week minimum required under this rule.



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Evaluation on Student Progress (pages 6 & 7):

- Student evaluations are a shared responsibility of both the student and the employer to ensure that the student's practical training goals are being satisfactorily met. The student is responsible for conducting a self-evaluation based on his or her own training progress. The employer must review and sign the self-evaluation to attest to its accuracy. The student submits the first assessment within twelve months and a final evaluation that recaps all the training and knowledge acquired during the complete training period. Enter the range of the student evaluation dates (the timeline for which this evaluation is relevant). The student must sign, print name, and enter date of signature. The Employer Official with Signatory Authority must sign, print name, and enter the date of signature to show concurrence with the assessment information that the student has entered.