

I-765, Application For Employment Authorization

Do not write in this block.

Remarks	Action Block	Fee Stamp
A#		
Applicant is filing under §274a.12 _____		
<input type="checkbox"/> Application Approved. Employment Authorized / Extended (<i>Circle One</i>) until _____ (Date). _____ (Date). Subject to the following conditions: _____ <input type="checkbox"/> Application Denied. <input type="checkbox"/> Failed to establish eligibility under 8 CFR 274a.12 (a) or (c). <input type="checkbox"/> Failed to establish economic necessity as required in 8 CFR 274a.12(c)(14), (18) and 8 CFR 214.2(f)		

I am applying for: Permission to accept employment.
 Replacement (*of lost employment authorization document*)
 Renewal of my permission to accept employment (*attach previous employment authorization document*).

1. Name (Family Name in CAPS) (First) (Middle)
 GONZALES Marie

2. Other Names Used (Include Maiden Name)

3. Address in the United States (Number and Street) (Apt. Number)
 123 Main St.
 (Town or City) (State/Country) (ZIP Code)
 LA CA/USA 91010

4. Country of Citizenship/Nationality
 Philippines

5. Place of Birth (Town or City) (State/Province) (Country)
 Manila Philippines

6. Date of Birth (mm/dd/yyyy) 7. Gender
 11/11/1971 Male Female

8. Marital Status Married Single
 Widowed Divorced

9. Social Security Number (Include all numbers you have ever used) (if any)
 999-77-8888

10. Alien Registration Number (A-Number) or I-94 Number (if any)
 none

11. Have you ever before applied for employment authorization from USCIS?
 Yes (If yes, complete below) No

Which USCIS Office? _____ Date(s) _____

Results (Granted or Denied - attach all documentation)

12. Date of Last Entry into the U.S. (mm/dd/yyyy)
 10/1/2007

13. Place of Last Entry into the U.S.
 LA, CA

14. Manner of Last Entry (Visitor, Student, etc.)
 K-1

15. Current Immigration Status (Visitor, Student, etc.)
 Adjustment of status applicant

16. Go to **Part 2** of the Instructions, Eligibility Categories. In the space below, place the letter and number of the category you selected from the instructions (For example, (a)(8), (c)(17)(iii), etc.).
 Eligibility under 8 CFR 274a.12
 (C) (9) ()

Certification.

Your Certification: I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information that the U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. I have read the Instructions in **Part 2** and have identified the appropriate eligibility category in **Block 16**.

Signature	Telephone Number	Date
-----------	------------------	------

Signature of person preparing form, if other than above: 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.

Print Name	Address	Signature	Date
------------	---------	-----------	------

Remarks	Initial Receipt	Resubmitted	Relocated		Completed		
			Rec'd	Sent	Approved	Denied	Returned

