**TABLE OF CHANGES – FORM**

**Form I-765, Application for Employment Authorization**

**OMB Number: 1615-0040**

**01/19/2017**

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| **Reason for Revision: SSA Enumeration.** |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Pages 1-2** | **[Page 1]**  …  **8. Marital Status**  Single/Married/Divorced/Widowed  **9. Social Security Number** (Include all numbers you have ever used, if any)  **10. Alien Registration Number (A-Number)** or **Form I-94 Number** (if any)  **11. Have you ever before applied for employment authorization from USCIS?**  Yes (Complete the following questions.)  Which USCIS Office? / Dates  Results (Granted or Denied- attach all documentation)  No (Proceed to **Question 12.)**  **12. Date of Last Entry Into the U.S., on or about** (mm/dd/yyyy)  **13. Place of Last Entry into the U.S.**  **14. Status at Last Entry** (B-2 Visitor, F-1 Student, No Lawful Status, etc.)  **15. Current Immigration Status** (Visitor, Student, etc.)  **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.  **[Page 2]**  **17. (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 / Employer’s Name as listed in E-Verify  Employer’s E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number  **18. (c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Question 16** above, please provide the receipt number of your H-1B principal spouse’s most recent Form I-797 Notice of Approval for Form I-129.  **19. (c)(35) and (c)(36) Eligibility Category**  **a.** If you entered the eligibility category (c)(35) or (c)(36) in **Question 16** above, please provide the receipt number of the Form I-140 beneficiary’s Form I-797 Notice of Approval for Form I-140.  **b.** Have you **EVER** been arrested for and/or convicted of any crime? Yes/No  **NOTE:** If you answered “Yes” to **Item Numbers 19.b.**, refer to **Item Number 5.**, **Item H.** or **Item I.** in the **Who May File Form I-765** section of these Instructions for information about providing court dispositions.  **Certification**  I certify, under penalty of perjury, that the foregoing is true and correct. Furthermore, I authorize the release of any information 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 the instructions and have identified the appropriate eligibility category in **Question 16**. | **[Page 1]**  …  [no change]  **9.a.** Has the Social Security Administration (SSA) ever officially issued a Social Security card to you? Yes/No  **NOTE:** If you answered “Yes” to **Item Number 9.a.**, provide the information requested in **Item Number 9.b.**  **9.b.** Provide your Social Security number (SSN) (if known)  **10.** Do you want the SSA to issue you a Social Security card? (You must also answer “Yes” to **Item Number 11.**, **Consent for Disclosure**, to receive a card.) Yes/No  **NOTE:** If you answered “No” to **Item Number 10.**, skip to **Item Number 14.** If you answered “Yes” to **Item Number 10.**, you must also answer “Yes” to **Item Number 11.**  **11.** **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 10.** - **11.**,provide the information requested in **Item Numbers 12.a.** - **13.b.**  **Father’s Name**  **12.a.** Family Name (Last Name)  **12.b.** Given Name (First Name)  **[Page 2]**  **Mother’s Name** (Provide your mother’s birth name.)  **13.a.** Family Name (Last Name)  **13.b.** Given Name (First Name)  **14. Alien Registration Number (A-Number)** or **Form I-94 Number** (if any)  **15. Have you ever before applied for employment authorization from USCIS?**  Yes (Complete the following questions.)  Which USCIS Office? / Dates  Results (Granted or Denied- attach all documentation)  No (Proceed to **Item Number 16.)**  **16. Date of Last Entry Into the U.S., on or about** (mm/dd/yyyy)  **17. Place of Last Entry into the U.S.**  **18. Status at Last Entry** (B-2 Visitor, F-1 Student, No Lawful Status, etc.)  **19. Current Immigration Status** (Visitor, Student, etc.)  **20.** **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.  **21. (c)(3)(C) Eligibility Category.** If you entered the eligibility category (c)(3)(C) in **Item Number 20.** 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 / Employer’s Name as listed in E-Verify  Employer’s E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number  **22. (c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Item Number 20.** above, please provide the receipt number of your H-1B principal spouse’s most recent Form I-797 Notice of Approval for Form I-129.  **23. (c)(35) and (c)(36) Eligibility Category**  **a.** If you entered the eligibility category (c)(35) or (c)(36) in **Item Number 20.** above, please provide the receipt number of the Form I-140 beneficiary’s Form I-797 Notice of Approval for Form I-140.    **b.** Have you **EVER** been arrested for and/or convicted of any crime? Yes/No  **NOTE:** If you answered “Yes” to **Item Number 23.b.**, refer to **Item Number 5.**, **Item H.** or **Item I.** in the **Who May File Form I-765** section of these Instructions for information about providing court dispositions.  **Certification**  I certify, under penalty of perjury, that the foregoing is true and correct. Furthermore, I authorize the release of any information 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 the Instructions and have identified the appropriate eligibility category in **Item Number 20.** |