

START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation (Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)

Last Name (Family Name)		First Name (Given Name)				Middle Initial	Other Last Names Used (if any)			
Address (Street Number and Name)			Apt. Number City or Town					State	ZIP Code	
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number			Employe	ee's E-mail Addr	ess	Er	nployee's T	Felephone Number	

### I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

### I attest, under penalty of perjury, that I am (check one of the following boxes):

1. A citizen of the United States						
2. A noncitizen national of the United States (See instructions)						
3. A lawful permanent resident (Alien Registration Number/USCI	S Numbe	er):				
4. An alien authorized to work until (expiration date, if applicable, Some aliens may write "N/A" in the expiration date field. (See ins Aliens authorized to work must provide only one of the following docum	truction	s)	lete Form I-0	).		QR Code - Section 1
An Alien Registration Number/USCIS Number OR Form I-94 Admissio					De	o Not Write In This Space
Alien Registration Number/USCIS Number: OR 2. Form I-94 Admission Number: OR OR						
3. Foreign Passport Number:						
Country of Issuance:						
Signature of Employee			Today's Dat	e ( <i>mm/dd</i> .	/уууу)	
Preparer and/or Translator Certification (check of I did not use a preparer or translator. A preparer(s) and/or tra (Fields below must be completed and signed when preparers ar I attest, under penalty of perjury, that I have assisted in the knowledge the information is true and correct.	nslator( nd/or tra	anslators ass	ist an empl	oyee in c	ompletin	g Section 1.)
Signature of Preparer or Translator				Today's [	Date (mm/	/dd/yyyy)
Last Name (Family Name)	First Name (0	e (Given Name)				
Address (Street Number and Name)	(Street Number and Name) City or Town				State	ZIP Code
STOP at this point, the employe					n.	

'RINT this form and bring it with you to the interview.

STOP



# **Employment Eligibility Verification**

## **Department of Homeland Security**

## USCIS Form I-9 OMB No. 1615-0047 Expires 08/31/2019

U.S. Citizenship and Immigration Services

Section 2 Employer or Authorized Representative Review and Verification

Employee Info from Section 1	(Family Name)	First Name	e (Given Name)	M.I.	Citizenship/Immigration Status			
List A Identity and Employment Aut	horization	OR	List B Identity	AND		List C Employment Authorization		
Document Title		Document Title		Docu	ument Tit	le		
Issuing Authority	Issuing Authori	ty	Issui	Issuing Authority				
Document Number	Document Num	ıber	Docu	Document Number				
Expiration Date ( <i>if any</i> )( <i>mm/dd/yy</i> )	Expiration Date (if any)(mm/dd/yyyy)			Expiration Date (if any)(mm/dd/yyyy)				
Document Title								
Issuing Authority		Additional In	formation			QR Code - Sections 2 & 3 Do Not Write In This Space		
Document Number								
Expiration Date ( <i>if any</i> )( <i>mm/dd/yy</i> )	<i>(y)</i>	-						
Document Title		-						
ssuing Authority		-						
Document Number		-						
Expiration Date (if any)(mm/dd/yy)	/v)	-						

Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment <i>(mm/dd/yyyy)</i> :					(*	(See instructions for exemptions)				
Signature of Employer or Authorized Representative				Today's Date(mm/dd/yyyy) Title			e of Employer or Authorized Representative			
Last Name of Employer or Authorized Representative First Name of			Employer or Authorized Representative			tative	Employer's Business or Organization Name			
Employer's Business or Organization Addre	er and Name) City or Town				State	ZIP Code				
Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.)										
A. New Name (if applicable)						B. Date of Rehire (if applicable)				
Last Name (Family Name)	e (Family Name) First Name (Given Nar				Middle Init	tial Date (mm/dd/yyyy)				
C. If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below.										
Document Title			Docume	Document Number			Expiration [	Date (if any) (mm/dd/yyyy)		
I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.										
Signature of Employer or Authorized Representative Today's D			Bate (mm/o	dd/yyyy)	Name	e of En	mployer or Authorized Representative			

# LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A		LIST B		LIST C		
	Documents that Establish Both Identity and		Documents that Establish Identity		Documents that Establish Employment Authorization		
	Employment Authorization	DR	AN	ND			
	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551)	1.	Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as	1.	A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT		
3.	Foreign passport that contains a temporary I-551 stamp or temporary		name, date of birth, gender, height, eye color, and address		<ul><li>(1) NOT VALID FOR LIME COTMENT</li><li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li></ul>		
	I-551 printed notation on a machine- readable immigrant visa	2.	ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or		(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION		
4.	Employment Authorization Document that contains a photograph (Form I-766)		information such as name, date of birth, gender, height, eye color, and address	2.	Certification of Birth Abroad issued by the Department of State (Form FS-545)		
5	For a nonimmigrant alien authorized	3.	School ID card with a photograph	3.	Certification of Report of Birth		
0.	<ul> <li>to work for a specific employer because of his or her status:</li> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following: <ul> <li>(1) The same name as the passport;</li> </ul> </li> </ul>	4.	Voter's registration card		issued by the Department of State (Form DS-1350)		
		5.	U.S. Military card or draft record	1	Original or certified copy of birth		
		6.	Military dependent's ID card		certificate issued by a State,		
		7.	U.S. Coast Guard Merchant Mariner Card		county, municipal authority, or territory of the United States bearing an official seal		
	and (2) An endorsement of the alien's	8.	Native American tribal document	5.	Native American tribal document		
	nonimmigrant status as long as that period of endorsement has	9.	Driver's license issued by a Canadian government authority	6.	U.S. Citizen ID Card (Form I-197)		
	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.	F	For persons under age 18 who are unable to present a document listed above:		Identification Card for Use of Resident Citizen in the United States (Form I-179)		
6.	Passport from the Federated States of	10			Employment authorization document issued by the		
	Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form	11		-	Department of Homeland Security		
	I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI	-	2. Day-care or nursery school record				

Examples of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

## Refer to the instructions for more information about acceptable receipts.