

### **Employment Eligibility Verification**

#### **Department of Homeland Security**

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 08/31/2019

► 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 than the first day of employment, but it			ust complete an	nd sign Se	ection 1 c	of Form I-9 no later	
Last Name (Family Name)	First Name (Given Nam	me)	Middle Initial	al Other Last Names Used (if any)			
Address (Street Number and Name)	Apt. Number	City or Town		State ZIP			
Date of Birth (mm/dd/yyyy)  U.S. Social S	Security Number Empl	oyee's E-mail Ad	E	Employee's Telephone Number			
I am aware that federal law provides f connection with the completion of thi	s form.			or use of	false do	cuments in	
I attest, under penalty of perjury, that	I am (check one of the	following box	(es):				
1. A citizen of the United States							
2. A noncitizen national of the United Sta	ates (See instructions)						
3. A lawful permanent resident (Alien	Registration Number/USCI	S Number):					
4. An alien authorized to work until (ex	piration date, if applicable,	mm/dd/yyyy):					
Some aliens may write "N/A" in the ex	piration date field. (See ins	structions)				000 1 0 11 1	
Aliens authorized to work must provide only An Alien Registration Number/USCIS Num					Do	QR Code - Section 1 Not Write In This Space	
Alien Registration Number/USCIS Numb     OR	per:						
2. Form I-94 Admission Number: OR							
Foreign Passport Number:     Country of Issuance:							
Signature of Employee Today's Date (mm.					n/dd/yyyy)		
Preparer and/or Translator Cer I did not use a preparer or translator. (Fields below must be completed and set	A preparer(s) and/or tra	anslator(s) assistend/or translators	s assist an empl	loyee in c	completing	g Section 1.)	
I attest, under penalty of perjury, that knowledge the information is true and		completion of	Section 1 of th	is form a	and that	to the best of my	
Signature of Preparer or Translator				Today's [	Date (mm/	(dd/yyyy)	
Last Name (Family Name)		First Na	me (Given Name)	)			
Address (Street Number and Name)		City or Town			State	ZIP Code	

STOP

Employer Completes Next Page

STOP



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### Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You

must physically examine one docum of Acceptable Documents.")	nent from List A	A OR a combil	nation of one	document f	from List B a	and one d	ocum	ent from Lis	st C as listed on the "Lists	
Employee Info from Section 1 Last Name (Family Name)				First Name (Given Name)			M.I	. Citizer	nship/Immigration Status	
List A Identity and Employment Auth	O orization	R	List Iden		1	AND		Emplo	List C yment Authorization	
Document Title		Document 7	Γitle			Docui	ment <sup>-</sup>	Title		
Issuing Authority Issuing Au			thority			Issuir	Issuing Authority			
Document Number Docume			nent Number				Document Number			
Expiration Date (if any)(mm/dd/yyyy)		Expiration [	Expiration Date (if any)(mm/dd/yyyy)				Expiration Date (if any)(mm/dd/yyyy)			
Document Title										
Issuing Authority		Additiona	al Informatio	n					Code - Sections 2 & 3 of Write In This Space	
Document Number										
Expiration Date (if any)(mm/dd/yyyy	/)									
Document Title										
Issuing Authority										
Document Number										
Expiration Date (if any)(mm/dd/yyyy	/)									
Certification: I attest, under per (2) the above-listed document(semployee is authorized to work	s) appear to b	e genuine a								
The employee's first day of e	mployment (	(mm/dd/yyy	y):		(See	instruct	ions	for exem	ptions)	
Signature of Employer or Authorized Representative Today's			Today's Da	e(mm/dd/yyyy) Title of Em			nployer or Authorized Representative			
Last Name of Employer or Authorized Representative First Name of Emp			f Employer or <i>i</i>	Authorized R	orized Representative Employer's Business or Organization			or Organization Name		
Employer's Business or Organization	on Address (Str	reet Number a	and Name)	City or Tov	wn			State	ZIP Code	
Section 3. Reverification a	and Rehires	(To be con	npleted and	signed by	employer	or autho	rized	represen	tative.)	
A. New Name (if applicable)							tte of Rehire (if applicable)			
Last Name (Family Name)	First I	Name (Given	Name)	Mic	Middle Initial Date		ate (mm/dd/yyyy)			
<b>C.</b> If the employee's previous grant continuing employment authorization				provide the	information	for the d	ocum	ent or rece	pt that establishes	
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	d Representati	ve Today's	s Date (mm/c	ld/yyyy)	Name of E	mployer	or Aut	horized Re	presentative	

# 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  Documents that Establish  Both Identity and  Employment Authorization	OR	LIST B  Documents that Establish Identity  AN	۱D	LIST C Documents that Establish Employment Authorization
2.	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 name, date of birth, gender, height, eye	1.	A Social Security Account Number card, unless the card includes one of the following restrictions:  (1) NOT VALID FOR EMPLOYMENT
	Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa  Employment Authorization Document		color, and address  2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information carbon agencies.		(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION     (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION  Certification of Birth Abroad issued
	that contains a photograph (Form I-766)  For a nonimmigrant alien authorized		information such as name, date of birth, gender, height, eye color, and address  3. School ID card with a photograph		by the Department of State (Form FS-545)  Certification of Report of Birth
	to work for a specific employer because of his or her status:  a. Foreign passport; and		<ol> <li>Voter's registration card</li> <li>U.S. Military card or draft record</li> <li>Military dependent's ID card</li> </ol>	4.	issued by the Department of State (Form DS-1350)  Original or certified copy of birth certificate issued by a State,
	. Form I-94 or Form I-94A that has the following:  (1) The same name as the passport; and	<b>7</b>	7. U.S. Coast Guard Merchant Mariner Card  8. Native American tribal document		county, municipal authority, or territory of the United States bearing an official seal
	(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		Driver's license issued by a Canadian government authority	5. 6.	Native American tribal document  U.S. Citizen ID Card (Form I-197)
			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 Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		<ul><li>10. School record or report card</li><li>11. Clinic, doctor, or hospital record</li><li>12. Day-care or nursery school record</li></ul>	8.	Employment authorization document issued by the Department of Homeland Security

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.

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