## I-9 Form

Please attach a picture of your passport. If you do not have a passport, please attach a picture of your driver's license and a picture of your Social Security Card.



START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the Instructions.

ANTI-DISCRIMINATION NOTICE: All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in Section 1, or specify which acceptable documentation employees must present for Section 2 or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

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 (if any) Other Las			Other Last	t Names Used (if any)			
Address (Street Number and Name)			Apt. Numb			if any)	City or Tow				State		ZIP Code		
Date of Birth (mm/dd/yyyy)	U.S. Soc	ial Secu	rity Number		Emp	loyee's	Email Addres	S				Employee	e's Tele	ephone Number	
I am aware that federal law provides for imprisonment and/or fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or immigration status, is true and correct.		1 2 3 4 If you	L. A citizen o 2. A noncitize 3. A lawful pe 1. A noncitize	f the Ur en natic ermane en (othe Numbe	nited St nal of nt resider than	ed States al of the United States (See Inst t resident (Enter USCIS or A-Nu than Item Numbers 2. and 3. a 4. enter one of these:				Instructions.) -Number.) 3. above) authorized to work unti			page 2 and 3 of the instructions.): . (exp. date, if any)		
Signature of Employee									Tod	ay's Date (	(mm/dd/yyy	y)			
If a preparer and/or translate	or assist	ted you	in complet	ng Sec	tion 1,	, that p	oerson MUST	complete	e the	e Prepare	r and/or Tra	anslator Ce	ertifica	ition on Page 3.	
Section 2. Employer Review and Verification: Employers or their authorized representative must complete and sign Section 2 within three business days after the employee's first day of employm ent, and must physically examine, or examine consistent with an alternative procedure authorized by the Secretary of DHS, documentation from List A OR a combination of documentation from List B and List C. Enter any additional documentation in the Additional Information box; see Instructions.															
		List			OR			st B					List		
Document Title 1															
Issuing Authority															
Document Number (if any)															
Expiration Date (if any)															
Document Title 2 (if any)					Ado	dition	al Informat	ion							
Issuing Authority															
Document Number (if any)															
Expiration Date (if any)															
Document Title 3 (if any)															
Issuing Authority															
Document Number (if any)															
Expiration Date (if any)						Check	here if you us	ed an alte	ernat	ive proced	dure authori	zed by DHS	s to exa	amine documents.	
Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee, (2) the above-listed documentation appears 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.															
Last Name, First Name and Title of Employer or Authorized Represe				esentati	ve	e Signature of Employer or Authorized Representati					presentativ	e	Toda	y's Date (mm/dd/yyyy)	
Employer's Business or Organization Name Employer's Business or Organization Address, City or Town, State, ZIP Code															

For reverification or rehire, complete Supplement B, Reverification and Rehire on Page 4.

## LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired. \*Documents extended by the issuing authority are considered unexpired. Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

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

LIST A		LIST B	LIST C				
Documents that Establish Both Identity and Employment Authorization	OR	Documents that Establish Identity ANI	Documents that Establish Employment Authorization				
U.S. Passport or U.S. Passport Card     Permanent Resident Card or Alien     Registration Receipt Card (Form I-551)		<ol> <li>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,</li> </ol>	<ol> <li>A Social Security Account Number card, unless the card includes one of the followin restrictions:         <ul> <li>(1)NOT VALID FOR EMPLOYMENT</li> <li>(2)VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3)VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ul> </li> </ol>				
<ul> <li>Foreign passport that contains a</li> <li>temporary I-551 stamp or temporary</li> <li>I-551 printed notation on a machine- readable immigrant visa</li> </ul>		<ul> <li>gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as</li> </ul>					
4. Employment Authorization Document that contains a photograph (Form I-766)		name, date of birth, gender, height, eye color, and address	2. Certification of report of birth issued by the				
5. For an individual temporarily authorized		3 School ID card with a photograph	Department of State (Forms DS-1350, FS-545, FS-240)				
to work for a specific employer because of his or her status or parole:		4 Voter's registration card	3. Original or certified copy of birth certificate				
a.Foreign passport; and		5 U.S. Military card or draft record	issued by a State, county, municipal authority, or territory of the United States				
b.Form I-94 or Form I-94A that has		6 Military dependent's ID card	bearing an official seal				
the following: (1)The same name as the		7 U.S. Coast Guard Merchant Mariner Card	4 Native American tribal document				
passport; and		8 Native American tribal document	5 U.S. Citizen ID Card (Form I-197)				
(2)An endorsement of the individual's status or parole as long as that period of		<ul> <li>9 Driver's license issued by a Canadian</li> <li>government authority</li> </ul>	6 Identification Card for Use of Resident Citizen in the United States (Form I-179)				
endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or		For persons under age 18 who are unable to present a document listed above:	<ul> <li>Employment authorization document</li> <li>issued by the Department of Homeland</li> <li>Security</li> </ul>				
limitations identified on the form.	1	10 School record or report card	For examples, see Section 7 and Section 13 of the M-274 on uscis.gov/i-9-central.				
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		11 Clinic, doctor, or hospital record					
		12 Day-care or nursery school record	The Form I-766, Employment Authorization Document, is a List A, Item Number 4. document, not a List C document.				
		Acceptable Receipts	I				
May be prese	ente	d in lieu of a document listed above for a te	emporary period.				
		For receipt validity dates, see the M-274.					
<ul> <li>Receipt for a replacement of a lost, stolen, or damaged List A document.</li> <li>Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual.</li> </ul>		Receipt for a replacement of a lost, stolen, or OR damaged List B document.	Receipt for a replacement of a lost, stolen, or damaged List C document.				
<ul> <li>Form I-94 with "RE" notation or refugee stamp issued to a refugee.</li> </ul>							

\*Refer to the Employment Authorization Extensions page on I-9 Central for more information.