

### **Employment Eligibility Verification**

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

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 10/31/2022

▶ 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.

than the <b>first day of employment</b> , b	out not before	accepting a job	offer.)			TOWN ASSESSED.	of Form I-9 no late	
ast Name <i>(Family Name)</i>	me) First Name (Given Name) Middle Initial Oth			Other	her Last Names Used <i>(if any)</i>			
ddress (Street Number and Name)		Apt. Number	City or Town		1	State	ZIP Code	
Date of Birth (mm/dd/yyyy)  U.S. Soc	ial Security Nui	mber Employ	yee's E-mail Add	ress	E	Employee's Telephone Number		
am aware that federal law provid connection with the completion of attest, under penalty of perjury, t	f this form.				or use o	of false d	ocuments in	
1. A citizen of the United States								
2. A noncitizen national of the United	States (See in	structions)						
3. A lawful permanent resident (Ali	en Registration	Number/USCIS	Number):	- Pgo -			and the second control of the second control	
4. An alien authorized to work until								
Some aliens may write "N/A" in the					-			
Aliens authorized to work must provide An Alien Registration Number/USCIS No. 1. Alien Registration Number/USCIS No.	umber OR Forr	following docume n I-94 Admission	ent numbers to co Number OR For	omplete Form I-9: eign Passport Nu	mber.		QR Code - Section 1 Not Write In This Space	
OR								
2. Form I-94 Admission Number:								
OR 3. Foreign Passport Number:								
Country of Issuance:				<del> </del>				
Signature of Employee				Today's Data	(mm/da	than a d		
				Today's Date	: (IIIII/UC	vyyyy)		
Preparer and/or Translator C  I did not use a preparer or translator.  Fields below must be completed and attest, under penalty of perjury, the	A prepared signed where	rer(s) and/or tran	slator(s) assisted //or translators		yee in d	completin	g Section 1.)	
	and correct.		ompiction of c	conon rorum.	3 101111	and that	to the best of my	
nowledge the information is true				-	Today's	Date (mm/	dd/yyyy)	
nowledge the information is true a Signature of Preparer or Translator			TIK .					
nowledge the information is true	AND		First Name	e (Given Name)				

STOP

Employer Completes Next Page

STO



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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	OR a combin	nation of one	document i	from List E	3 and one d	ocument f	rom List C as listed on the "Lists		
Employee Info from Section 1	Last Name (Fa	nmily Name)		First Name	e (Given N	Vame)	M.I. (	Citizenship/Immigration Status		
List A Identity and Employment Auth	Ol norization	R	Lis Ider			AND		List C Employment Authorization		
Document Title		Document <sup>3</sup>	Title	_		Docur	ment Title			
Issuing Authority		Issuing Aut	hority			Issuin	g Authorit	У		
Document Number		Document I	Number			Docu	ment Num	ber		
Expiration Date (if any) (mm/dd/yyy	ry)	Expiration [	Date (if any)	(mm/dd/yyy	/)	Expira	ation Date	(if any) (mm/dd/yyyy)		
Document Title							indianage consensión consensión a			
Issuing Authority	7 2-8 4	Additiona	al Information	on				QR Code - Sections 2 & 3 Do Not Write In This Space		
Document Number							***************************************			
Expiration Date (if any) (mm/dd/yyy	<i>y)</i>									
Document Title										
Issuing Authority										
Document Number	1									
Expiration Date (if any) (mm/dd/yyy	ry)									
Certification: I attest, under pe (2) the above-listed document(s employee is authorized to work	appear to b	e genuine a								
The employee's first day of e	mployment (	mm/dd/yyy	y):		(Se	e instruct	ions for	exemptions)		
Signature of Employer or Authorize	d Representativ	/e	Today's Da	ite (mm/dd/y	ууу) Т	itle of Empl	oyer or Au	ithorized Representative		
Last Name of Employer or Authorized F	Representative	First Name of	f Employer or	Authorized R	epresentati	ve Emplo	oyer's Bus	iness or Organization Name		
Employer's Business or Organization	on Address (Str	eet Number a	and Name)	City or Tov	vn		Stat	e ZIP Code		
Section 3. Reverification	and Rehires	(To be con	npleted and	signed by	employe	er or autho	rized rep	resentative.)		
A. New Name (if applicable)						CONTRACT DESCRIPTION OF THE PARTY OF THE PAR		(if applicable)		
		lame (Given	me (Given Name)		Middle Initial [		Date (mm/dd/yyyy)			
C. If the employee's previous grant continuing employment authorizatio				, provide the	informati	on for the do	ocument o	r receipt that establishes		
Document Title	ir ar the space ;	orded belo		ent Number			Expirat	tion Date (if any) (mm/dd/yyyy)		
l attest, under penalty of perjury										
the employee presented docum Signature of Employer or Authorize			nave exam		1			te to the individual.  Ted Representative		
Tiployor of Mathonize		Jodays			Traine UI	- inhioyer C	n muullell	ωα πορισσοπαίίνο		

# 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	DR	LIST B  Documents that Establish Identity  AN	ND.	LIST C  Documents that Establish  Employment Authorization
3.	U.S. Passport or U.S. Passport Card  Permanent Resident Card or Alien Registration Receipt Card (Form I-551)  Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa  Employment Authorization Document	_	<ul> <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, gender, height, eye color, and address</li> <li>ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth,</li> </ul>	2.	•
5.	that contains a photograph (Form I-766)  For a nonimmigrant alien authorized to work for a specific employer	_	gender, height, eye color, and address  3. School ID card with a photograph  4. Voter's registration card	3.	by the Department of State (Forms DS-1350, FS-545, FS-240)  Original or certified copy of birth certificate issued by a State, county, municipal authority, or
and the second s	because of his or her status:  a. Foreign passport; and b. Form I-94 or Form I-94A that has		U.S. Military card or draft record     Military dependent's ID card	4.	territory of the United States bearing an official seal
	the following: (1) The same name as the passport; and		<ol> <li>U.S. Coast Guard Merchant Mariner Card</li> <li>Native American tribal document</li> <li>Driver's license issued by a Canadian government authority</li> </ol>		Native American tribal document U.S. Citizen ID Card (Form I-197)
	(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has				Identification Card for Use of Resident Citizen in the United States (Form I-179)
	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		For persons under age 18 who are unable to present a document listed above:		Employment authorization document issued by the Department of Homeland Security
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	,	10. School record or report card  11. Clinic, doctor, or hospital record  12. Day-care or nursery school record	december of the second	

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

Refer to the instructions for more information about acceptable receipts.

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