

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 not				st complete an	d sign Se	ection 1 o	f Form I-9 no later			
Last Name (Family Name)	First Name (Given Na	me)	Middle Initial C			Other Last Names Used (if any)				
Address (Street Number and Name)	Apt. Number	Apt. Number City or Town				State	ZIP Code			
Date of Birth (mm/dd/yyyy) U.S. Social Sec	urity Number Emp	loyee's E-	mail Addro	ess	Employee's Telephone Nu					
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/USCIS Number):										
4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy):										
Some aliens may write "N/A" in the expira	•	•	,				OP Code Section 1			
Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.										
Alien Registration Number/USCIS Number: OR				_						
2. Form I-94 Admission Number: OR										
3. Foreign Passport Number:				_						
Country of Issuance:										
Signature of Employee Today's Date (mm							n/dd/yyyy)			
Preparer and/or Translator Certif	ication (check o	ne):								
I did not use a preparer or translator. A preparer(s) and/or translator(s) assisted the employee in completing Section 1.										
(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)										
I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.										
Signature of Preparer or Translator					Today's [Date (mm/d	dd/yyyy)			
Last Name (Family Name) First Name (Given Name)										
Address (Street Number and Name)		City or T	ity or Town				ZIP Code			
L		-!				1	1			

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 docu of Acceptable Documents.")												
Employee Info from Section 1 Last Name (Family Name)					First Name (Given Name)				e) N	M.I.	Citize	nship/Immigration Status
List A Identity and Employment Aut	horizatio	OR n			List Iden			AN	ID	·	Emple	List C oyment Authorization
Document Title			Document 7	Γitle					Docume	nt Title	9	
Issuing Authority			Issuing Auth	nority					Issuing A	Author	ity	
Document Number			Document Number					Document Number				
Expiration Date (if any)(mm/dd/yyy	vy)		Expiration D	Date (i	if any)(ı	mm/dd/y	vyy)		Expiratio	n Date	e (if an	y)(mm/dd/yyyy)
Document Title									-			
Issuing Authority			Additiona	I Info	rmatio	n						Code - Sections 2 & 3 Not Write In This Space
Document Number												
Expiration Date (if any)(mm/dd/yyy	vy)											
Document Title												
Issuing Authority												
Document Number												
Expiration Date (if any)(mm/dd/yyy	vy)											
Certification: I attest, under po (2) the above-listed document(employee is authorized to wor	s) appea	r to be	genuine a									
The employee's first day of				y):			(S	ee in:	struction	ns foi	r exen	nptions)
Signature of Employer or Authorized Representative			Today's Date(mm/dd/yyyy) Title o					of Employer or Authorized Representative				
Last Name of Employer or Authorized	Represent	ative	First Name of	f Emplo	oyer or <i>i</i>	Authorize	d Representa	ative	Employe	er's Bu	siness	or Organization Name
Employer's Business or Organizati	ion Addre	ss (Stre	et Number a	nd Na	ame)	City or	Town		1	Sta	ate	ZIP Code
Section 3. Reverification	and Re	hires	(To be con	nplete	ed and	l signed	by emplo	ver or	authoriz	ed rei	preser	ntative.)
A. New Name (if applicable)									3. Date of			
Last Name (Family Name)		First Na	ame (Given	Name	;)		Middle Initia	al I	Date (mm	/dd/yy	yy)	
C. If the employee's previous grant continuing employment authorization					expired,	provide	the informa	ition fo	r the docu	ıment	or rece	eipt that establishes
Document Title					ocume	ent Numb	er			Expir	ation D	ate (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 Authorize						dd/yyyy)						epresentative

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	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) Foreign passport that contains a		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 (2) VALID FOR WORK ONLY WITH	
	temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa Employment Authorization Document		 color, and address 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, 		(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of Birth Abroad issued	
5.	that contains a photograph (Form I-766) For a nonimmigrant alien authorized to work for a specific employer because of his or her status:		gender, height, eye color, and address 3. School ID card with a photograph 4. Voter's registration card	3.	by the Department of State (Form FS-545) Certification of Report of Birth issued by the Department of State (Form DS-1350)	
	 a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; 		U.S. Military card or draft record Military dependent's ID card U.S. Coast Guard Merchant Mariner Card	4.	Original or certified copy of birth certificate issued by a State, 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 not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		9. Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document listed above:		U.S. Citizen ID Card (Form I-197) 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		10. School record or report card 11. Clinic, doctor, or hospital record 12. Day-care or nursery school record	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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