

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.

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 be Last Name (Family Name) Fir				Other L	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	curity Number Employee's E-mail Address					Employee's Telephone 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	e following boxe	es):					
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 expiration date field. (See instructions)								
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/						(dd/yyyy)		
Preparer and/or Translator Certification (check one): 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/dd/yyyy)						d/yyyy)		
Last Name (Family Name) First Name (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 document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")

of Acceptable Documents.")	Helit Holli List A	Or a combin	alion of one	aocament i	IOIII LISED AIN	a one docui	nem nom L	St C as listed on the Lists	
Employee Info from Section 1	Last Name (Fai	mily Name)		First Name	e (Given Nam	e) M	.I. Citizer	nship/Immigration Status	
List A Identity and Employment Aut	OF horization	R	List Ident		Al	ND	Emplo	List C cyment Authorization	
Document Title		Document T	ïtle			Documen	t Title		
Issuing Authority	Issuing Auth	ssuing Authority				Issuing Authority			
Document Number Documer			Number Docume				nent Number		
Expiration Date (if any) (mm/dd/yy	уу)	Expiration D	ate (if any) (mm/dd/yyy	/)	Expiration	Date (if an	y) (mm/dd/yyyy)	
Document Title									
Issuing Authority		Additiona	I Informatio	n				Code - Sections 2 & 3 of Write In This Space	
Document Number									
Expiration Date (if any) (mm/dd/yy	yy)								
Document Title									
Issuing Authority									
Document Number									
Expiration Date (if any) (mm/dd/yy	уу)								
Certification: I attest, under pe (2) the above-listed document(employee is authorized to wor	s) appear to be	genuine ar							
The employee's first day of e	employment (r	nm/dd/yyyy	/):		(See in	nstruction	s for exen	nptions)	
Signature of Employer or Authorize	ed Representativ	е	Today's Dat	e (mm/dd/y	ryyy) Title	of Employe	r or Authoriz	ed Representative	
Last Name of Employer or Authorized	Representative	First Name of	Employer or A	Authorized R	epresentative	Employer	's Business	or Organization Name	
Employer's Business or Organizati	on Address (<i>Stre</i>	eet Number a	nd Name)	City or To	wn	1	State	ZIP Code	
Section 3. Reverification	and Rehires	(To be com	pleted and	signed by	employer o	r authorize	d represer	ntative.)	
A. New Name (if applicable)				B. Date o			of Rehire (if applicable)		
Last Name (Family Name)	First N	t Name (Given Name)			ldle Initial	Date (mm/e	dd/yyyy)		
C. If the employee's previous grant continuing employment authorization				provide the	information f	or the docur	ment or rece	eipt that establishes	
Document Title			Docume	Document Number			Expiration Date (if any) (mm/dd/yyyy)		
l attest, under penalty of perjuithe employee presented docur									
Signature of Employer or Authorized Representative Today's Date (mm/dd/yyyy) Name of E				Name of Em	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 Documents that Establish Both Identity and Employment Authorization	LIST B Documents that Establish Identity OR AN		LIST C Documents that Establish Employment Authorization ND		
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)	 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 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, 	2.	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 INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of report of birth 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: a. Foreign passport; and	5	gender, height, eye color, and address S. School ID card with a photograph Voter's registration card U.S. Military card or draft record	3.	by the Department of State (Forms DS-1350, FS-545, FS-240)	
	b. Form I-94 or Form I-94A that has the following:(1) The same name as the passport; and		 Military dependent's ID card U.S. Coast Guard Merchant Mariner Card Native American tribal document 	5.	Native American tribal document U.S. Citizen ID Card (Form I-197) Identification Card for Use of	
	(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 For persons under age 18 who are unable to present a document listed above:	7.	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	1	O. School record or report card Clinic, doctor, or hospital record Day-care or nursery school record			

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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