



Employment Eligibility Verification

Department of Homeland Security U.S. Citizenship and Immigration Services

USCIS Form I-9 OMB No. 1615-0047 Expires 03/31/2016

START HERE. Read instructions carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

			•		Other Name	•	,
and Name)		Apt. Number	City or Town			State	Zip Code
y) U.S. Social Se	ecurity Number	E-mail Addre	 \$\$			Telepl	hone Number
Il law provides ompletion of th of perjury, tha ed States al of the United	is form. t I am (check	one of the fo		statements	or use of	false do	cuments in
resident (Alien			S Number):				
work until (expira	ition date, if ap	plicable, mm/do	l ⁽ уууу)		Some alien	s may wri	te "N/A" in this f
ed to work, provi	de your Alien	Registration I	Number/USCIS	Number Ol	R Form I-94	l Admissi	ion Number:
Number/USCI	S Number:			_			3-D Barcode
OR						Do No	อะเบ Barcode ot Write in This
our admission no le following: lort Number:							
zance:							
write "N/A" on t	he Foreign P	assport Numb	er and Country	of Issuance	fields. (Se	e instruc	tions)
					Date (mm/	/dd/yyyy):	
nslator Certif	ication (To t	be completed .	and signed if S	ection 1 is p	repared by	a person	other than th
of perjury, that I correct.	I have assis	ted in the co	mpletion of th	is form and	that to the	best of	my knowled
ranslator;						Date (n	mm/dd/yyyy):
			Firs	it Name (Give	n Name)		
nd Name)			City or Town			State	Zip Code
70	d Name)	d Name)	d Name)	d Name) City or Town State			

Section 2. Employer or Author (Employers or their authorized representative must physically examine one document from the "Lists of Acceptable Documents" on the re- issuing authority, document number, and exp	must comple List A OR exi lext page of th	ete and sign So amine a comb als form. For e	sction 2 within	document l	days of the e	d one distuute	of from List C as listed or		
Employee Last Name, First Name and Mid	dle Initial fro	m Section 1:							
List A Identity and Employment Authorization	OR	List B			AND	List Employment	C Authorization		
Document Title:	Docume	ent Title;			Documer	nt Title:			
Issuing Authority:	Issuing .	Issuing Authority:			Issuing Authority:				
Document Number:	Docume	Document 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:									
Document Number:	1								
Expiration Date (if any)(mm/dd/yyyy):							A.D. Dawarda		
Document Title:						Do No	3-D Barcode of Write in This Space		
Issuing Authority:									
Document Number:	1								
Expiration Date (if any)(mm/dd/yyyy):									
Certification	1000								
l attest, under penalty of perjury, that (above-listed document(s) appear to be employee is authorized to work in the l	genuine ar	id to relate t							
The employee's first day of employment	nt (<i>mm/dd/</i>)	/yyy):		(See ir	structions	for exemption	ons.)		
ignature of Employer or Authorized Representative			(mm/dd/yyyy)	Title of Employer or Authorized Representative			Representative		
Last Name (Family Name)	First Nam	e (Given Nam	e)	Employer's	Business or (Organization N	ame		
Employer's Business or Organization Address	(Street Numb	er and Name)	City or Tow	n		State	Zip Code		
Section 3. Reverification and Re A. New Name (if applicable) Last Name (Famili							antative.) oplicable) (mm/dd/yyyy):		
C. If employee's previous grant of employment a presented that establishes current employme					document fro	om List A or List	t C the employee		
Document Title:		Document N	umber:			Expiration Da	ate (if any)(mm/dd/yyyy):		
attest, under penalty of perjury, that to the employee presented document(s), the									
Signature of Employer or Authorized Represer	itative:	Date (mm/do	<i>₩</i> уууу):	Print Nam	e of Employe	r or Authorized	Representative:		
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One 10 from List A -orOne ID from List B

one ID from List C

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)R	LIST B Documents that Establish Identity	ND	LIST C Documents that Establish Employment Authorization	
3.	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	2	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,	100	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 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:	105-	gender, height, eye color, and address School ID card with a photograph Voter's registration card		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;	5. 6. 7.		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 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.	Native American tribal document Driver's license issued by a Canadian	5.	Native American tribal document	
			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	11	D. School record or report card Clinic, doctor, or hospital record Day-care or nursery school record	8.	Employment authorization document issued by the Department of Homeland Security	

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.

COPY & EMAIL / FAX WITH COMPLETED 19

Most frequently Used 1Ds