

### **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			ust complete a	nd sign Si	ection 1 o	f Form I-9 no later		
than the first day of employment, but not Last Name (Family Name)	AACTER TERMINE TO THE TOTAL TO T			Other I	her Last Names Used (if any)			
Address (Street Number and Name)	Apt. Number	Apt. Number City or Town				ZIP Code		
Deta-f Birth ( (dd ) 110 Cook Cook	with Missach P.			l e	mplaysola	Talanhana Number		
Date of Birth (mm/dd/yyyy)  U.S. Social Security 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 a	ım (check one of th	e following bo	(es):					
1. A citizen of the United States								
2. A noncitizen national of the United States	(See instructions)							
3. A lawful permanent resident (Alien Reg	istration Number/USCI	S Number):						
4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy):								
Some allens may write "N/A" in the expira	tion date field. (See Inc	structions)						
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.								
1. 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 Da	ate (mm/dd/yyyy)						
Preparer and/or Translator Certifi  I did not use a preparer or translator.  (Fields below must be completed and signe	A preparer(s) and/or tra	anslator(s) assiste						
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 co Signature of Preparer or Translator	rrect,			Todav's F	ate (mm/d	d/vvvv)		
On the state of th						.,,,,,		
.ast Name (Family Name) First Name (Given Name)								
Address (Street Number and Name)	s (Street Number and Name) City or Town				State	ZIP Code		
					l .	I		



Employer Completes Next Page





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Section 2. Employer or Auth (Employers or their authorized representa- must physically examine one document fr of Acceptable Documents.")	itive must co	molete and sign Sei	tion 2 within	3 business da	ys of the en	nployee's fi ument from	rst day of employment. You List C as listed on the "Lists		
Employee Info from Section 1	Name <i>(Famil</i>	y Name)	First Nar	ne <i>(Given Nai</i>	ne)	M.1, Citiz	enship/Immigration Status		
List A Identity and Employment Authoriza	OR tion		.ist B lentity	Þ	ND	Emį	List C ployment Authorization		
Document Title	S D	ocument Title			Docume	nt Title			
Issuing Authority	Issuing Authority			Issuing /	Issuing Authority				
Document Number	Document Number			Docume	Document Number				
Expiration Date (if any) (mm/dd/yyyy)	E	Expiration Date (if any) (mm/ddl/yyyy)			Expiration	Expiration Date (if any) (mm/dd/yyyy)			
Document Title									
Issuing Authority		Additional Informa	ition				R Code - Sections 2 & 3 Not Write In This Space		
Document Number									
Expiration Date (if any) (mm/dd/yyyy)									
Document Title	\$2.00 mg								
Issuing Authority	C/12/17/6/19/6/19								
Document Number	- Particular de la constante d								
Expiration Date (if any) (mm/dd/yyyy)									
Certification: I attest, under penalty (2) the above-listed document(s) appendingly to work in the The employee's first day of employ	ear to be ge United Sta	enuine and to rela ates.		nployee nam		) to the be	st of my knowledge the		
Signature of Employer or Authorized Representative Today's			Pate (mm/dd/yyyy) Title of Employer or Author			er or Author	ized Representative		
Last Name of Employer or Authorized Represe	niative Fir	st Name of Employer	or Authorized I	Representative	Employe	er's Busines	s or Organization Name		
Employer's Business or Organization Addi	ress (Street I	Number and Name)	City or To	wn		State	ZIP Code		
Section 3. Reverification and R	ehires (To	be completed ar	id signed b	∕ employer c	A STATE OF THE PARTY OF THE PAR	ed represe Rehire (if e	**************************************		
ast Name (Family Name)				Middle Initial Date (			(mm/dd/yyyy)		
If the employee's previous grant of emplontinuing employment authorization in the	oyment auth	orization has expire	d, provide th	e information (	for the docu	ment or rec	eipt that establishes		
Document Title			Document Number			Expiration Date (if any) (mm/dd/yyyy)			
attest, under penalty of perjury, that ne employee presented document(s),	the docum	of my knowledge ient(s) I have exa	, this emplo mined appe	oyee is authorar to be gen	orized to w uine and t	ork in the	United States, and if the individual.		
ignature of Employer or Authorized Repre	esentative	Today's Date (mm	n/dd/yyyy)	Name of En	nployer or A	uthorized F	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	OF	LIST B Documents that Establish Identity	1D	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 that contains a photograph (Form		<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, 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,         gender, height, eye color, and address</li> </ol>	2.	by the Department of State (Forms
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status:  a. Foreign passport; and b. Form I-94 or Form I-94A that has		3. School ID card with a photograph 4. Voter's registration card 5. U.S. Military card or draft record 6. Military dependent's ID card	3.	DS-1350, FS-545, FS-240)  Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	the following:  (1) The same name as the passport; 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.		U.S. Coast Guard Merchant Mariner Card     Native American tribal document	5. 6.	Native American tribal document U.S. Citizen ID Card (Form I-197) Identification Card for Use of
			9. Driver's license issued by a Canadian government authority  For persons under age 18 who are unable to present a document listed above:		Resident Citizen in the United States (Form I-179)  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		

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

Refer to the instructions for more information about acceptable receipts.