

Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9 OMB No.1615-0047 Expires 07/31/2026

START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the <u>Instructions</u>.

ANTI-DISCRIMINATION NOTICE: All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in **Section 1**, or specify which acceptable documentation employees must present for **Section 2** or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

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 before accepting a job offer.												
Last Name (Family Name)		First Name (Given Name)		Middle In	itial (if any)	Other Last	Names Us	ed (if any))		
Address (Street Number and	d Name)	Ap	t. Number (if a	nny) City or Tow	n			State	ZII	P Code		
Date of Birth (mm/dd/yyyy)	U.S. So	Social Security Number Employee's Email Address						Employee's Telephone Number				
I am aware that federal law provides for imprisonment and/or fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or		Check one of the following boxes to attest to your citizenship or immigration status (See page 2 and 3 of the instructions.): 1. A citizen of the United States 2. A noncitizen national of the United States (See Instructions.) 3. A lawful permanent resident (Enter USCIS or A-Number.) 4. A noncitizen (other than Item Numbers 2, and 3, above) authorized to work until (exp. date, if any) If you check Item Number 4., enter one of these:										
immigration status, is to correct.	USCIS A-Numi	or or	orm I-94 Admission Number OR Fo			oreign Passport Number and Country of Issuance						
Signature of Employee				Today's Date (mm/dd/y					уу)			
If a preparer and/or translator assisted you in completing Section 1, that person MUST complete the Preparer and/or Translator Certification on Page 3.												
Section 2. Employer business days after the e authorized by the Secreta documentation in the Add	Review and mployee's firs ary of DHS, d litional Inform	I Verification: Er st day of employme ocumentation from lation box; see Inst	mployers or t nt, and must List A OR a ructions.	heir authorized physically exar combination of	representa nine, or ex documenta	ative must camine con ation from l	complete a sistent with List B and I	nd sign S e an altern ist C. En	ection 2 ative pro ter any a	within three ocedure additional		
		List A	OR		ist B		AND		List C			
Document Title 1												
Issuing Authority												
Document Number (if any)												
Expiration Date (if any)												
Document Title 2 (if any)			Addi	itional Informat	tion							
Issuing Authority												
Document Number (if any)												
Expiration Date (if any)												
Document Title 3 (If any)												
Issuing Authority												
Document Number (if any)												
Expiration Date (if any)				Check here if you u	ised an alte	rnative proc	edure author	zed by DH	S to exam	nine documents.		
Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee, (2) the above-listed documentation appears to be genuine and to relate to the employee named, and (3) to the best of my knowledge, the employee is authorized to work in the United States.												
Last Name, First Name and	Title of Employ	er or Authorized Repr	esentative	Signature of E	mployer or	Authorized F	Representativ	re	Today's	Date (mm/dd/yyyy)		
Employer's Business or Organization Name Employer's Business or Organization Address, City or Town, State, ZIP Code							r					

For reverification or rehire, complete Supplement B, Reverification and Rehire on Page 4.

LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

* Documents extended by the issuing authority are considered unexpired.

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

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

LIST A		LIST B	LIST C				
Documents that Establish Both Identity and Employment Authorization	OR	Documents that Establish Identity ANI	Documents that Establish Employment Authorization				
U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		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,	 A Social Security Account Number card, unless the card includes one of the followin restrictions: (1) NOT VALID FOR EMPLOYMEN 				
Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as	(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION				
Employment Authorization Document that contains a photograph (Form I-766)		name, date of birth, gender, height, eye color, and address	2. Certification of report of birth issued by the				
5. For an individual temporarily authorized		3. School ID card with a photograph	Department of State (Forms DS-1350, FS-545, FS-240)				
to work for a specific employer because of his or her status or parole:		4. Voter's registration card	Original or certified copy of birth certificate				
a. Foreign passport; and		5. U.S. Military card or draft record	issued by a State, county, municipal authority, or territory of the United States				
 b. Form I-94 or Form I-94A that has the following: 		6. Military dependent's ID card	bearing an official seal				
(1) The same name as the		7. U.S. Coast Guard Merchant Mariner Card	4. Native American tribal document				
passport; and (2) An endorsement of the		8. Native American tribal document	U.S. Citizen ID Card (Form I-197) Identification Card for Use of Resident				
individual's status or parole as long as that period of		Driver's license issued by a Canadian government authority	Citizen in the United States (Form I-179)				
endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or		For persons under age 18 who are unable to present a document listed above:	7. Employment authorization document issued by the Department of Homeland Security				
limitations identified on the form.		10. School record or report card	For examples, see <u>Section 7</u> and <u>Section 13</u> of the M-274 on uscis.gov/i-9-central.				
Passport from the Federated States of Micronesia (FSM) or the Republic of the		11. Clinic, doctor, or hospital record	The Form I-766, Employment				
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		12. Day-care or nursery school record	Authorization Document, is a List A, Item Number 4. document, not a List C document.				
	•	Acceptable Receipts					
May be prese		d in lieu of a document listed above for a te For receipt validity dates, see the M-274.	emporary period.				
Receipt for a replacement of a last	Ι		I B. Luc				
Receipt for a replacement of a lost, stolen, or damaged List A document.	OR	Receipt for a replacement of a lost, stolen, or damaged List B document.	Receipt for a replacement of a lost, stolen, or damaged List C document.				
Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual.							
Form I-94 with "RE" notation or refugee stamp issued to a refugee.							

^{*}Refer to the Employment Authorization Extensions page on <u>I-9 Central</u> for more information.