

## **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.

Section 1. Employee Infor	mation and Atte	station (E	mployees must complete	and sign Se	ection 1 of	Form I-9 no later	
than the first day of employmen	t, but not before acce	epting a job o	offer.)	_			
Last Name (Family Name)	Name (Family Name) First Name (Given Name) Middle Initial Other Names Used (if any)						
Address (Street Number and Name)	Ap	t. Number	City or Town		State	Zip Code	
Date of Birth (mm/dd/yyyy)  U.S. Social Security Number  E-mail Address					Telephone Number		
I am aware that federal law prov connection with the completion		ent and/or fi	nes for false statements	s or use of	false doc	uments in	
I attest, under penalty of perjury	, that I am (check o	ne of the fo	llowing):				
A citizen of the United States							
A noncitizen national of the Ur	nited States (See inst	tructions)					
A lawful permanent resident (A	Alien Registration Nu	mber/USCIS	Number):				
An alien authorized to work until ( (See instructions)	expiration date, if applic	cable, mm/dd/	<sup>'</sup> yyyy)	. Some alien	s may write	e "N/A" in this field.	
For aliens authorized to work,	provide your Alien R	egistration N	lumber/USCIS Number <b>O</b>	R Form I-94	4 Admissio	on Number:	
1. Alien Registration Number/U	JSCIS Number:						
OR					3-D Barcode Do Not Write in This Space		
2. Form I-94 Admission Numb	er:				BONO	Write iii Tiiis Opace	
If you obtained your admiss States, include the following		P in connecti	on with your arrival in the	United			
Foreign Passport Numbe	r:						
Country of Issuance:							
Some aliens may write "N/A	" on the Foreign Pas	sport Number	er and Country of Issuanc	e fields. (Se	ee instruct	ions)	
Signature of Employee: Date (m.					m/dd/yyyy):		
Preparer and/or Translator Comployee.)	Certification (To be	completed a	and signed if Section 1 is a	prepared by	a person	other than the	
I attest, under penalty of perjury information is true and correct.	, that I have assiste	d in the cor	npletion of this form an	d that to th	e best of	my knowledge the	
Signature of Preparer or Translator:					Date (mm/dd/yyyy):		
.ast Name (Family Name) First Name (Given Name)							
Address (Street Number and Name)			City or Town		State	Zip Code	

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Employer Completes Next Page

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