

Instructions for Employment Eligibility Verification

O.V.

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

USCIS

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

Read all instructions carefully before completing this form.

Anti-Discrimination Notice. It is illegal to discriminate against any work-authorized individual in hiring, discharge, recruitment or referral for a fee, or in the employment eligibility verification (Form I-9 and E-Verify) process based on that individual's citizenship status, immigration status or national origin. 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. For more information, call the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC) at 1-800-255-7688 (employees), 1-800-255-8155 (employers), or 1-800-237-2515 (TDD), or visit www.justice.gov/crt/about/osc.

What Is the Purpose of This Form?

Employers must complete Form I-9 to document verification of the identity and employment authorization of each new employee (both citizen and noncitizen) hired after November 6, 1986, to work in the United States. In the Commonwealth of the Northern Mariana Islands (CNMI), employers must complete Form I-9 to document verification of the identity and employment authorization of each new employee (both citizen and noncitizen) hired after November 27, 2011. Employers should have used Form I-9 CNMI between November 28, 2009 and November 27, 2011.

General Instructions

Employers are responsible for completing and retaining Form I-9. For the purpose of completing this form, the term "employer" means all employers, including those recruiters and referrers for a fee who are agricultural associations, agricultural employers, or farm labor contractors.

Form I-9 is made up of three sections. Employers may be fined if the form is not complete. Employers are responsible for retaining completed forms. Do not mail completed forms to U.S. Citizenship and Immigration Services (USCIS) or Immigration and Customs Enforcement (ICE).

Section 1. Employee Information and Attestation

Newly hired employees must complete and sign Section 1 of Form I-9 no later than the first day of employment. Section 1 should never be completed before the employee has accepted a job offer.

Provide the following information to complete Section 1:

Name: Provide your full legal last name, first name, and middle initial. Your last name is your family name or surname. If you have two last names or a hyphenated last name, include both names in the last name field. Your first name is your given name. Your middle initial is the first letter of your second given name, or the first letter of your middle name, if any.

Other names used: Provide all other names used, if any (including maiden name). If you have had no other legal names, write "N/A."

Address: Provide the address where you currently live, including Street Number and Name, Apartment Number (if applicable), City, State, and Zip Code. Do not provide a post office box address (P.O. Box). Only border commuters from Canada or Mexico may use an international address in this field.

Date of Birth: Provide your date of birth in the mm/dd/yyyy format. For example, January 23, 1950, should be written as 01/23/1950.

U.S. Social Security Number: Provide your 9-digit Social Security number. Providing your Social Security number is voluntary. However, if your employer participates in E-Verify, you must provide your Social Security number.

E-mail Address and Telephone Number (Optional): You may provide your e-mail address and telephone number. Department of Homeland Security (DHS) may contact you if DHS learns of a potential mismatch between the information provided and the information in DHS or Social Security Administration (SSA) records. You may write "N/A" if you choose not to provide this information.

All employees must attest in Section 1, under penalty of perjury, to their citizenship or immigration status by checking one of the following four boxes provided on the form:

1. A citizen of the United States

- 2. A noncitizen national of the United States: Noncitizen nationals of the United States are persons born in American Samoa, certain former citizens of the former Trust Territory of the Pacific Islands, and certain children of noncitizen nationals born abroad.
- 3. A lawful permanent resident: A lawful permanent resident is any person who is not a U.S. citizen and who resides in the United States under legally recognized and lawfully recorded permanent residence as an immigrant. The term "lawful permanent resident" includes conditional residents. If you check this box, write either your Alien Registration Number (A-Number) or USCIS Number in the field next to your selection. At this time, the USCIS Number is the same as the A-Number without the "A" prefix.
- **4. An alien authorized to work:** If you are not a citizen or national of the United States or a lawful permanent resident, but are authorized to work in the United States, check this box.

If you check this box:

- a. Record the date that your employment authorization expires, if any. Aliens whose employment authorization does not expire, such as refugees, asylees, and certain citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, or Palau, may write "N/A" on this line.
- b. Next, enter your Alien Registration Number (A-Number)/USCIS Number. At this time, the USCIS Number is the same as your A-Number without the "A" prefix. If you have not received an A-Number/USCIS Number, record your Admission Number. You can find your Admission Number on Form I-94, "Arrival-Departure Record," or as directed by USCIS or U.S. Customs and Border Protection (CBP).
 - (1) If you obtained your admission number from CBP in connection with your arrival in the United States, then also record information about the foreign passport you used to enter the United States (number and country of issuance).
 - (2) If you obtained your admission number from USCIS within the United States, or you entered the United States without a foreign passport, you must write "N/A" in the Foreign Passport Number and Country of Issuance fields.

Sign your name in the "Signature of Employee" block and record the date you completed and signed Section 1. By signing and dating this form, you attest that the citizenship or immigration status you selected is correct and that you are aware that you may be imprisoned and/or fined for making false statements or using false documentation when completing this form. To fully complete this form, you must present to your employer documentation that establishes your identity and employment authorization. Choose which documents to present from the Lists of Acceptable Documents, found on the last page of this form. You must present this documentation no later than the third day after beginning employment, although you may present the required documentation before this date.

Preparer and/or Translator Certification

The Preparer and/or Translator Certification must be completed if the employee requires assistance to complete Section 1 (e.g., the employee needs the instructions or responses translated, someone other than the employee fills out the information blocks, or someone with disabilities needs additional assistance). The employee must still sign Section 1.

Minors and Certain Employees with Disabilities (Special Placement)

Parents or legal guardians assisting minors (individuals under 18) and certain employees with disabilities should review the guidelines in the *Handbook for Employers: Instructions for Completing Form I-9 (M-274)* on www.uscis.gov/
I-9Central before completing Section 1. These individuals have special procedures for establishing identity if they cannot present an identity document for Form I-9. The special procedures include (1) the parent or legal guardian filling out Section 1 and writing "minor under age 18" or "special placement," whichever applies, in the employee signature block; and (2) the employer writing "minor under age 18" or "special placement" under List B in Section 2.



Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9 OMB No. 1615-0

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 Information than the first day of employment, but no			and sign Sectio	n 1 of Form I-9 no later
Last Name (Family Name)	First Name (Given Name	e) Middle Initial	Other Names Us	ed (if any)
Address (Street Number and Name)	Apt. Number	City or Town	State	Zip Code
Date of Birth (mm/dd/yyyy) U.S. Social Secu	rity Number E-mail Addre	ss	, T	elephone Number
I am aware that federal law provides fo connection with the completion of this		fines for false statements	or use of false	documents in
l attest, under penalty of perjury, that I	am (check one of the fo	ollowing):		
A citizen of the United States				
A noncitizen national of the United Sta	ates (See instructions)			
A lawful permanent resident (Alien Re	gistration Number/USCI	S Number):		
An alien authorized to work until (expiration (See instructions)	n date, if applicable, mm/do	d/yyyy)	Some aliens may	y write "N/A" in this field.
For aliens authorized to work, provide	your Alien Registration i	Number/USCIS Number OF	R Form I-94 Adr	nission Number:
1. Alien Registration Number/USCIS	Number:			B. 151 00 B
OR				3-D Barcode to Not Write in This Space
2. Form I-94 Admission Number:				
If you obtained your admission num States, include the following:	ber from CBP in connec	tion with your arrival in the l	United	
Foreign Passport Number:				
Country of Issuance:				
Some aliens may write "N/A" on the			fields (See ins	structions)
			1	
Signature of Employee:			Date (mm/dd/y)	(yy):
Preparer and/or Translator Certifica	ation (To be completed	and signed if Section 1 is p	repared by a pe	rson other than the
attest, under penalty of perjury, that I information is true and correct.	nave assisted in the co	mpletion of this form and	that to the bes	st of my knowledge the
Signature of Preparer or Translator:	E .		Da	ate (mm/dd/yyyy):
Last Name (Family Name)		First Name (Give	n Name)	

issuing authority, document number, and									
Employee Last Name, First Name and I	Widdle Initial fro	m Section	n 1:						
List A Identity and Employment Authorization	OR		t B			AND		List	C t Authorization
Document Title:		ent Title:	ittity				ocument T		t Additionization
Issuing Authority:	Issuing	Authority	:				suing Auth	ority:	
Document Number:									
	Docum	ent Numb	er.				ocument N	umber:	
Expiration Date (if any)(mm/dd/yyyy):	Expirati	on Date (if any)	(mm/dd/yyyy)):	Е	xpiration D	ate (if any)	(mm/dd/yyyy):
Document Title:							,		V
Issuing Authority:									
Document Number:									
Expiration Date (if any)(mm/dd/yyyy):									
Expiration Date (if any)(inini/duryyyy).						×			3-D Barcode
Document Title:								Do N	ot Write in This Space
Issuing Authority:									
Document Number:									
Expiration Data (if any) (mm/dd/) and								lese:	
Expiration Date (if any)(mm/dd/yyyy):									
Certification				7					•
attest, under penalty of perjury, the above-listed document(s) appear to employee is authorized to work in the	be genuine a	nd to rel							
The employee's first day of employ					(See	instru	ctions fo	r exempti	ions.)
Signature of Employer or Authorized Representative			Date (mm/dd/yyyy) Title of Employe			nployer or A	Authorized	Representative	
Land Market Control	F:	- (0:	••					s construction and construction.	
Last Name (Family Name)	First Nan	ne (Given	Name	²⁾	Employer	s Busir	ness or Org	anization N	lame
Employer's Business or Organization Addre	ess (Street Num	ber and N	ame)	City or Towr	1			State	Zip Code
						*			
Section 3. Reverification and	Rehires (To	be com	plete	d and signed	d by empi	loyer o	or authoriz	ed repres	entative.)
A. New Name (if applicable) Last Name (Fo									applicable) (mm/dd/yyyy).
If employee's previous grant of employments presented that establishes current employments.						he doc	ument from	List A or Lis	st C the employee
Document Title:		Docum	ent N	umber:			E	Expiration D	rate (if any)(mm/dd/yyyy):
attest, under penalty of perjury, that he employee presented document(s),									
Signature of Employer or Authorized Repre	esentative:	Date (r.	nm/da	/уууу):	Print Nar	me of E	Employer or	Authorize	d Representative:

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You

Section 2. Employer or Authorized Representative Review and Verification

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	DR	LIST B Documents that Establish Identity	ND	LIST C Documents that Establish Employment Authorization
2.	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-		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	1.	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
4.	readable immigrant visa Employment Authorization Document that contains a photograph (Form I-766)		government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	2.	(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of Birth Abroad issued by the Department of State (Form FS-545)
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status:	3. 4. 5.		3.	Certification of Report of Birth issued by the Department of State (Form DS-1350)
	a. Foreign passport; andb. Form I-94 or Form I-94A that has the following:(1) The same name as the passport;	6.	Military dependent's ID card U.S. Coast Guard Merchant Mariner Card	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
(2)	and (2) An endorsement of the alien's	8.	Native American tribal document	5.	Native American tribal document
	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.	Driver's license issued by a Canadian government authority		U.S. Citizen ID Card (Form I-197)
		F	For persons under age 18 who are unable to present a document listed above:		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.	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.