

EMPLOYMENT ELIGIBILITY VERIFICATION (Form I-9)

1 EMPLOYEE INFORMATION AND VERIFICATION (To be completed and signed by employee.)

Name: (Print or Type) Last	First	Middle	Birth Name
Address: Street Name and Number	City	State	ZIP Code
Date of Birth (Month/Day/Year)		Social Security Number	

I attest, under penalty of perjury, that I am (check box):

- 1. A citizen or national of the United States.
- 2. An Alien lawfully admitted for permanent residence (Alien Number A _____).
- 3. An alien authorized by the Immigration and Naturalization Service to work in the United States (Alien Number A _____ or Admission Number _____, expiration of employment authorization, if any _____).

I attest, under penalty of perjury, the documents that I have presented as evidence of identity and employment eligibility are genuine and relate to me and am aware that federal law provides for imprisonment and/or fine for any false statements or use of false documents in connection with this certification.

Signature	Date (Month/Day/Year)
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PREPARER/TRANSLATOR CERTIFICATION (To be completed if prepared by person other than the employee). I attest, under penalty of perjury, that the above was prepared by me at the request of the named individual and is based on all information of which I have knowledge.

Signature	Name: (Print or Type)
Address: (Street Name and Number)	City State ZIP Code

2 EMPLOYER INFORMATION AND VERIFICATION (To be completed and signed by employer.)

Instructions:

Examine one document from List A and check the appropriate box, OR examine one document from list B and one from List C AND check the appropriate boxes.

Provide the *Document Identification Number* and *Expiration Date* for the document checked.

List A Documents that Establish Identity and Employment Eligibility	List B Documents that Establish Identity	List C Documents that Establish Employment Eligibility
<input type="checkbox"/> 1. United States Passport <input type="checkbox"/> 2. Certificate of United States Citizenship <input type="checkbox"/> 3. Certificate of Naturalization <input type="checkbox"/> 4. Unexpired foreign passport with attached Employment Authorization <input type="checkbox"/> 5. Alien Registration Card with photograph <i>Document Identification</i> # _____ <i>Expiration Date (if any)</i> _____	_____ and _____ <input type="checkbox"/> 1. A State-issued driver's license or a State-issued I.D. card with photograph, or information, including name, sex, date of birth, height, weight and color of eyes. (Specify State) _____ <input type="checkbox"/> 2. U.S. Military Card <input type="checkbox"/> 3. Other (Specify document and issuing authority) _____ <i>Document Identification</i> # _____ <i>Expiration Date (if any)</i> _____	<input type="checkbox"/> 1. Original Social Security Number Card (other than a card stating it is not valid for employment) <input type="checkbox"/> 2. A birth certificate issued by State, county, or municipal authority bearing seal or other certification <input type="checkbox"/> 3. Unexpired INS Employment Authorization Specify form # _____ <i>Document Identification</i> # _____ <i>Expiration Date (if any)</i> _____

CERTIFICATION: I attest, under penalty of perjury, that I have examined the documents presented by the above individual, that they appear to be genuine and to relate to the individual named, and that the individual, to the best of my knowledge, is eligible to work in the United States.

Signature	Name (Print or Type)	Title
Employer Name	Address	Date