**Employment Eligibility Verification**

**Department of Homeland Security**

**U.S. Citizenship and Immigration Services**

**Form I-9**

OMB No. 1615-0047
Expires 03/31/2016

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**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.)*

<table>
<thead>
<tr>
<th>Last Name (Family Name)</th>
<th>First Name (Given Name)</th>
<th>Middle Initial</th>
<th>Other Names Used (if any)</th>
</tr>
</thead>
<tbody>
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<thead>
<tr>
<th>Address (Street Number and Name)</th>
<th>Apt. Number</th>
<th>City or Town</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
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<table>
<thead>
<tr>
<th>Date of Birth (mm/dd/yyyy)</th>
<th>U.S. Social Security Number</th>
<th>E-mail Address</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
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</table>

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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 am (check one of the following):

- [ ] A citizen of the United States
- [ ] A noncitizen national of the United States *(See instructions)*
- [ ] A lawful permanent resident (Alien Registration Number/USCIS Number):

- [ ] An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy) ___________. Some aliens may write "N/A" in this field. *(See instructions)*

For aliens authorized to work, provide your Alien Registration Number/USCIS Number or Form I-94 Admission Number:

1. Alien Registration Number/USCIS Number: ____________________________

   **OR**

2. Form I-94 Admission Number: ____________________________

   If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

   Foreign Passport Number: ____________________________

   Country of Issuance: ____________________________

   Some aliens may write "N/A" on the Foreign Passport Number and Country of Issuance fields. *(See instructions)*

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**Signature of Employee:** ____________________________

**Date (mm/dd/yyyy):** ____________________________

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**Preparer and/or Translator Certification** *(To be completed and signed if Section 1 is prepared by a person other than the employee.)*

I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

**Signature of Preparer or Translator:** ____________________________

**Date (mm/dd/yyyy):** ____________________________

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