

I-9, Employment Eligibility Verification

INSTRUCTIONS

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM.

Anti-Discrimination Notice. It is illegal to discriminate against any individual (other than an alien not authorized to work in the U.S.) in hiring, discharging, or recruiting or referring for a fee because of that individual's national origin or citizenship status. It is illegal to discriminate against work eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1 - Employee. All employees, citizens and noncitizens, hired after November 6, 1986, must complete Section 1 of this form at the time of hire, which is the actual beginning of employment. The employer is responsible for ensuring that Section 1 is timely and properly completed.

Preparer/Translator Certification. The Preparer/Translator Certification must be completed if Section 1 is prepared by a person other than the employee. A preparer/translator may be used only when the employee is unable to complete Section 1 on his/her own. However, the employee must still sign Section 1.

Section 2 - Employer. For the purpose of completing this form, the term "employer" includes those recruiters and referrers for a fee who are agricultural associations, agricultural employers or farm labor contractors.

Employers must complete Section 2 by examining evidence of identity and employment eligibility within three (3) business days of the date employment begins. If employees are authorized to work, but are unable to present the required document(s) within three business days, they must present a receipt for the application of the document(s) within three business days and the actual document(s) within ninety (90) days. However, if employers hire individuals for a duration of less than three business days, Section 2 must be completed at the time employment begins. **Employers must record:** 1) document title; 2) issuing authority; 3) document number, 4) expiration date, if any; and 5) the date employment begins. Employers must sign and date the certification. Employees must present original documents. Employers may, but are not required to, photocopy the document(s) presented. These photocopies may only be used for the verification process and must be retained with the I-9. **However, employers are still responsible for completing the I-9.**

Section 3 - Updating and Reverification. Employers must complete Section 3 when updating and/or reverifying the I-9. Employers must reverify employment eligibility of their employees on or before the expiration date recorded in Section 1. Employers **CANNOT** specify which document(s) they will accept from an employee.

- If an employee's name has changed at the time this form is being updated/ reverified, complete Block A.
- If an employee is rehired within three (3) years of the date this form was originally completed and the employee is still eligible to be employed on the same basis as previously indicated on this form (updating), complete Block B and the signature block.

- If an employee is rehired within three (3) years of the date this form was originally completed and the employee's work authorization has expired or if a current employee's work authorization is about to expire (reverification), complete Block B and:
 - examine any document that reflects that the employee is authorized to work in the U.S. (see List A or C),
 - record the document title, document number and expiration date (if any) in Block C, and complete the signature block.

Photocopying and Retaining Form I-9. A blank I-9 may be reproduced, provided both sides are copied. The instructions must be available to all employees completing this form. Employers must retain completed I-9s for three (3) years after the date of hire or one (1) year after the date employment ends, whichever is later.

For more detailed information, you may refer to the U.S. Citizenship and Immigration Services (USCIS) Handbook for Employers, (Form M-274). You may obtain the handbook at your local USCIS office.

Privacy Act Notice. The authority for collecting this information is the Immigration Reform and Control Act of 1986, Pub. L. 99-603 (8 USC 1324a).

This information is for employers to verify the eligibility of individuals for employment to preclude the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States.

This information will be used by employers as a record of their basis for determining eligibility of an employee to work in the United States. The form will be kept by the employer and made available for inspection by officials of the U.S. Citizenship and Immigration Services, Department of Labor and Office of Special Counsel for Immigration Related Unfair Employment Practices.

Submission of the information required in this form is voluntary. However, an individual may not begin employment unless this form is completed, since employers are subject to civil or criminal penalties if they do not comply with the Immigration Reform and Control Act of 1986.

Reporting Burden. We try to create forms and instructions that are accurate, can be easily understood and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. Accordingly, the reporting burden for this collection of information is computed as follows: 1) learning about this form, 5 minutes; 2) completing the form, 5 minutes; and 3) assembling and filing (recordkeeping) the form, 5 minutes, for an average of 15 minutes per response. If you have comments regarding the accuracy of this burden estimate, or suggestions for making this form simpler, you can write to U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., Washington, DC 20529. OMB No. 1615-0047. Do not mail your completed application to this address.

I-9, Employment Eligibility Verification

Please 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 eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification. To be completed and signed by employee at the time employment begins.

Print Name: Last	First	Middle Initial	Maiden Name
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #
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):	
		<input type="checkbox"/> A citizen of the United States <input type="checkbox"/> A national of the United States <input type="checkbox"/> A Lawful Permanent Resident (Alien # A _____) <input type="checkbox"/> An alien authorized to work until ____/____/____ (Alien # or Admission #) _____	
Employee's Signature			Date (month/day/year)

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.

Preparer's/Translator's Signature	Print Name
Address (Street Name and Number, City, State, Zip Code)	
Date (month/day/year)	

Section 2. Employer Review and Verification. To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number and expiration date, if any, of the document(s).

List A	OR	List B	AND	List C
Document title: _____		_____		_____
Issuing authority: _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): ____/____/____		____/____/____		____/____/____
Document #: _____		_____		_____
Expiration Date (if any): ____/____/____		_____		_____

CERTIFICATION - I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) ____/____/____ and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative	Print Name	Title
Business or Organization Name		Date (month/day/year)
Address (Street Name and Number, City, State, Zip Code)		

Section 3. Updating and Reverification. To be completed and signed by employer.

A. New Name (if applicable)	B. Date of rehire (month/day/year) (if applicable)
C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.	
Document Title: _____	Document #: _____
Expiration Date (if any): ____/____/____	

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Date (month/day/year)
--	-----------------------

LISTS OF ACCEPTABLE DOCUMENTS

LIST A

Documents that Establish Both
Identity and Employment
Eligibility

1. U.S. Passport (unexpired or expired)
2. Certificate of U.S. Citizenship
(*USCIS Form N-560 or N-561*)
3. Certificate of Naturalization
(*USCIS Form N-550 or N-570*)
4. Unexpired foreign passport,
with *I-551* stamp or attached
Form I-94 indicating unexpired
employment authorization
5. Permanent Resident Card or
Alien Registration Receipt Card
with photograph (*USCIS Form*
I-151 or I-551)
6. Unexpired Temporary Resident
Card (*USCIS Form I-688*)
7. Unexpired Employment
Authorization Card (*USCIS Form*
I-688A)
8. Unexpired Reentry Permit (*USCIS*
Form I-327)
9. Unexpired Refugee Travel
Document (*USIS Form I-571*)
10. Unexpired Employment
Authorization Document issued by
USCIS that contains a photograph
(*USCIS Form I-688B*)

OR

LIST B

Documents that Establish
Identity

1. 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
 2. ID card issued by federal, state
or local government agencies or
entities, provided it contains a
photograph or information such as
name, date of birth, gender, height,
eye color and address
 3. School ID card with a
photograph
 4. Voter's registration card
 5. U.S. Military card or draft record
 6. Military dependent's ID card
 7. U.S. Coast Guard Merchant
Mariner Card
 8. Native American tribal document
 9. Driver's license issued by a
Canadian government authority
- For persons under age 18 who
are unable to present a
document listed above:**
10. School record or report card
 11. Clinic, doctor or hospital record
 12. Day-care or nursery school
record

AND

LIST C

Documents that Establish
Employment Eligibility

1. U.S. Social Security card issued
by the Social Security
Administration (*other than a card*
stating it is not valid for
employment)
2. Certification of Birth Abroad
issued by the Department of State
(*Form FS-545 or Form DS-1350*)
3. Original or certified copy of a
birth certificate issued by a state,
county, municipal authority or
outlying possession of the United
States bearing an official seal
4. Native American tribal document
5. U.S. Citizen ID Card (*USCIS Form*
I-197)
6. ID Card for use of Resident
Citizen in the United States
(*USCIS Form I-179*)
7. Unexpired employment
authorization document issued by
USCIS (*other than those listed*
under List A)

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274)

NEW HIRE CHECKLIST

The following items must be signed and contained in every new hire employee packet. If a document does not apply, please write N/A. Please initial that the document has been presented to the employee and signed.

Employment Application (completed, dated and signed by applicant)	(Optional)	_____
Post-Hire Employee Data Sheet	(Optional)	_____
Federal Form W-4 - Employee Withholding Allowance	(Mandatory)	_____
California State Form DE-4 Employees Withholding Allowance Certificate	(Mandatory)	_____
I-9 Form - (completed by applicant and company representative)	(Mandatory)	_____
Voluntary Information Form	(Optional)	_____
Authorization to obtain Investigative Report	(Optional)	_____
Notification of Request for Investigative Consumer Report	(Optional)	_____
Workers' Compensation Benefits Statement and Physician Election Form (English and Spanish/Acknowledgment)	(Mandatory)	_____
State Disability Insurance Booklet-DE2515 (English/Spanish)	(Mandatory)	_____
EDD For Your Benefit Booklet-DE2320	(Mandatory)	_____
Family Care and Medical Leave and Pregnancy Disability Leave Notice (State)	(Optional)	_____
Family and Medical Leave Act of 1993 (Federal)	(Optional)	_____
California Paid Family Leave-DE2511 (English and Spanish)	(Mandatory)	_____
Department of Fair Employment and Housing Sexual Harassment Pamphlet (English and Spanish)	(Mandatory)	_____
Company's Sexual Harassment Policy with Acknowledgment	(Mandatory)	_____
Company's Drug and Alcohol Policy with Acknowledgment	(Optional)	_____
Employee Handbook	(Optional)	_____
Employee Handbook Acknowledgment of Receipt	(Optional)	_____
Insurance Premium Authorization	(Optional)	_____
Unearned Vacation Agreement	(Optional)	_____
Supplies/Uniform Cost Authorization	(Optional)	_____
Acknowledgment of Receipt of Mandatory Documents	(Optional)	_____

Date: _____

By: _____
Supervisor's Signature

Date: _____

By: _____
Employee Signature

Employee Name