

To From

## APPLICATION FOR EMPLOYMENT EQUAL OPPORTUNITY EMPLOYER

Personal Information Date													
Name					Social S	Security	Number						
Present Address		City	ty State Zip Coo				Code						
Phone Number	Referred	Ву					- !						
Employment Desir	ed												
Position					Date Yo	ou Can	Start	:	Sa <b>l</b> ary D	esired			
Are you employed? Yes	No	If so, may we inquire of your present employ	er? Yes [		No	E\ thi	er appl	lied to pany befo	re?	Yes	No [		
Education History													
	Name & Loca	tion of School		1	ears Atter	nded	Did Yo	u Graduate? Subjects Studied					
High School													
College													
Trade or Business School													
General Informatio	n												
Subjects of Special Study	or Specia <b>l</b> Tra	aining/Skills											
Do you have a Yes No State Have you convicted							rou ever been Yes No						
Are you eligible to work in the United States?  No What language(s) do you speak?  English (							other _						
Former Employers													
Dates		Address of Employer	Sala	arv I	Posit	tion			Reser	n for Leavii	ng		
From	ivaine (	Address of Employer	Sala	ar y	FUSI	uon	+		1100001	i ioi Leavii	iy		
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From													
То							$\perp$						
From				I									

Personal Information Give below the names of three persons not related to you, whom you have known at least one year. Name Address / Phone Number **Business** Years Known Authorization "I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws." Signature \_\_\_\_\_ Date \_\_\_\_\_ ------ DO NOT WRITE BELOW THIS LINE Interviewed by \_\_\_\_\_\_ Date \_\_\_\_\_ Remarks Neatness Character

Personality

Hired For Dept. Position Will Report Salary / Wage

Approved \_\_\_\_\_\_ Date \_\_\_\_\_

## **Employee's Withholding Certificate**

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Give Form W-4 to your employer.

OMB No. 1545-0074

Department of the T			Give Form W-4 to your employer.									
Internal Revenue Se		rst name and middle initial	g is subject to review by the IF  Last name	15.	(b) \$0	cial security number						
Step 1:	(a) 1	ist harre and middle initial	Last Harrie		(5) 30	cial security number						
Enter Personal Information		Address  Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213										
	(0)	Single or Married filing congretch.			or go to	www.ssa.gov.						
	(c) [	<ul><li>Single or Married filing separately</li><li>Married filing jointly or Qualifying surviving s</li></ul>	nouse									
		Head of household (Check only if you're unmar		of keeping up a home for vo	urself an	d a qualifving individual.						
		4 ONLY if they apply to you; otherwism withholding, other details, and privac		2 for more informatio	n on ea	ach step, who can						
Step 2: Multiple Job	os	Complete this step if you (1) hold mor also works. The correct amount of with										
or Spouse		Do <b>only one</b> of the following.										
Works		(a) Reserved for future use.										
		(b) Use the Multiple Jobs Worksheet	on page 3 and enter the resu	It in Step 4(c) below;	or							
		(c) If there are only two jobs total, you option is generally more accurate higher paying job. Otherwise, (b) is	than (b) if pay at the lower pa									
		TIP: If you have self-employment inco	ome, see page 2.									
		<b>4(b) on Form W-4 for only ONE of the</b> you complete Steps 3–4(b) on the Form			s. (You	r withholding will						
Step 3:		If your total income will be \$200,000 c	or less (\$400,000 or less if ma	arried filing jointly):								
Claim		Multiply the number of qualifying o										
Dependent and Other		Multiply the number of other depe	-									
Credits		Add the amounts above for qualifying this the amount of any other credits.		ents. You may add to	3	\$						
Step 4 (optional): Other		(a) Other income (not from jobs). expect this year that won't have w This may include interest, dividend	rithholding, enter the amount	of other income here.		\$						
Adjustment	S	(b) Deductions. If you expect to claim want to reduce your withholding, u				<b>\$</b>						
		(c) Extra withholding. Enter any addi	tional tay you want withhold	oooh <b>nov poriod</b>								
		(c) Extra withholding. Effici any addi	lional tax you want withheld e	each <b>pay periou</b>	4(c)	Φ						
Step 5: Sign Here	Unde	r penalties of perjury, I declare that this certi	ficate, to the best of my knowled	dge and belief, is true, co	orrect, a	nd complete.						
	Em	<b>ployee's signature</b> (This form is not va	lid unless you sign it.)	Da	te							
Employers Only	Employer identification number (EIN)											

Form W-4 (2023)

#### **General Instructions**

Section references are to the Internal Revenue Code.

#### **Future Developments**

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

#### **Purpose of Form**

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

**Exemption from withholding.** You may claim exemption from withholding for 2023 if you meet both of the following conditions: you had no federal income tax liability in 2022 and you expect to have no federal income tax liability in 2023. You had no federal income tax liability in 2022 if (1) your total tax on line 24 on your 2022 Form 1040 or 1040-SR is zero (or less than the sum of lines 27, 28, and 29), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2023 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2024.

**Your privacy.** If you have concerns with Step 2(c), you may choose Step 2(b); if you have concerns with Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c).

**Self-employment.** Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay income and self-employment taxes through withholding from your wages, you should enter the self-employment income on Step 4(a). Then compute your self-employment tax, divide that tax by the number of pay periods remaining in the year, and include that resulting amount per pay period on Step 4(c). You can also add half of the annual amount of self-employment tax to Step 4(b) as a deduction. To calculate self-employment tax, you generally multiply the self-employment income by 14.13% (this rate is a quick way to figure your selfemployment tax and equals the sum of the 12.4% social security tax and the 2.9% Medicare tax multiplied by 0.9235). See Pub. 505 for more information, especially if the sum of self-employment income multiplied by 0.9235 and wages exceeds \$160,200 for a given individual.

**Nonresident alien.** If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

### **Specific Instructions**

**Step 1(c).** Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

**Step 2.** Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Page 2

If you (and your spouse) have a total of only two jobs, you may check the box in option (c). The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is roughly accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



**Multiple jobs.** Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

#### Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2023 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

**Step 4(c).** Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

Form W-4 (2023)

#### Step 2(b) – Multiple Jobs Worksheet (Keep for your records.)



If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job. To be accurate, submit a new Form W-4 for all other jobs if you have not updated your withholding since 2019.

**Note:** If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables.

1	<b>Two jobs.</b> If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter that value on line 1. Then, <b>skip</b> to line 3	1	\$
2	<b>Three jobs.</b> If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3.		
	<b>a</b> Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries and enter that value on line 2a	<b>2</b> a	\$
	<b>b</b> Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount on line 2b	2b	\$
	c Add the amounts from lines 2a and 2b and enter the result on line 2c	2c	\$
3	Enter the number of pay periods per year for the highest paying job. For example, if that job pays weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc	3	
4	<b>Divide</b> the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in <b>Step 4(c)</b> of Form W-4 for the highest paying job (along with any other additional amount you want withheld)	4	\$
	Step 4(b) – Deductions Worksheet (Keep for your records.)		
1	Enter an estimate of your 2023 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income	1	\$
2	Enter:   • \$27,700 if you're married filing jointly or a qualifying surviving spouse • \$20,800 if you're head of household • \$13,850 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-"	3	\$
4	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information	4	\$
5	Add lines 3 and 4. Enter the result here and in Step 4(b) of Form W-4	5	\$

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

Form W-4 (2023) Page **4** 

Married Filing Jointly or Qualifying Surviving Spouse												
Higher Paying Job				Lowe	er Paying	Job Annua	al Taxable	Wage &	Salary			
Annual Taxable Wage & Salary	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$0	\$0	\$850	\$850	\$1,000	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,870
\$10,000 - 19,999	0	930	1,850	2,000	2,200	2,220	2,220	2,220	2,220	2,220	3,200	4,070
\$20,000 - 29,999	850	1,850	2,920	3,120	3,320	3,340	3,340	3,340	3,340	4,320	5,320	6,190
\$30,000 - 39,999	850	2,000	3,120	3,320	3,520	3,540	3,540	3,540	4,520	5,520	6,520	7,390
\$40,000 - 49,999	1,000	2,200	3,320	3,520	3,720	3,740	3,740	4,720	5,720	6,720	7,720	8,590
\$50,000 - 59,999	1,020	2,220	3,340	3,540	3,740	3,760	4,750	5,750	6,750	7,750	8,750	9,610
\$60,000 - 69,999	1,020	2,220	3,340	3,540	3,740	4,750	5,750	6,750	7,750	8,750	9,750	10,610
\$70,000 - 79,999	1,020	2,220	3,340	3,540	4,720	5,750	6,750	7,750	8,750	9,750	10,750	11,610
\$80,000 - 99,999	1,020	2,220	4,170	5,370	6,570	7,600	8,600	9,600	10,600	11,600	12,600	13,460
\$100,000 - 149,999	1,870	4,070	6,190	7,390	8,590	9,610	10,610	11,660	12,860	14,060	15,260	16,330
\$150,000 - 239,999	2,040	4,440	6,760	8,160	9,560	10,780	11,980	13,180	14,380	15,580	16,780	17,850
\$240,000 - 259,999	2,040	4,440	6,760	8,160	9,560	10,780	11,980	13,180	14,380	15,580	16,780	17,850
\$260,000 - 279,999	2,040	4,440	6,760	8,160	9,560	10,780	11,980	13,180	14,380	15,580	16,780	18,140
\$280,000 - 299,999 \$300,000 - 319,999	2,040 2,040	4,440 4,440	6,760	8,160 8,160	9,560 9,560	10,780 10,780	11,980 11,980	13,180	14,380 15,470	15,870 17,470	17,870	19,740 21,340
\$320,000 - 319,999 \$320,000 - 364,999	2,040	4,440	6,760 6,760	8,160	10,750	12,770	14,770	13,470 16,770	18,770	20,770	19,470 22,770	24,640
\$365,000 - 524,999	2,040	6,470	9,890	12,390	14,890	17,220	19,520	21,820	24,120	26,420	28,720	30,880
\$525,000 and over	3,140	6,840	10,460	13,160	15,860	18,390	20,890	23,390	25,890	28,390	30,890	33,250
φο20,000 απα στοι	0,110	0,010				d Filing S			20,000	20,000	00,000	00,200
Higher Paying Job						Job Annua			Salary			
Annual Taxable	\$0 -	\$10,000 -	\$20,000 -	\$30,000 -	\$40,000 -	\$50,000 -	\$60,000 -	\$70,000 -	\$80,000 -	\$90,000 -	\$100,000 -	\$110,000 -
Wage & Salary	9,999	19,999	29,999	39,999	49,999	59,999	69,999	79,999	89,999	99,999	109,999	120,000
\$0 - 9,999	\$310	\$890	\$1,020	\$1,020	\$1,020	\$1,860	\$1,870	\$1,870	\$1,870	\$1,870	\$2,030	\$2,040
\$10,000 - 19,999	890	1,630	1,750	1,750	2,600	3,600	3,600	3,600	3,600	3,760	3,960	3,970
\$20,000 - 29,999	1,020	1,750	1,880	2,720	3,720	4,720	4,730	4,730	4,890	5,090	5,290	5,300
\$30,000 - 39,999	1,020	1,750	2,720	3,720	4,720	5,720	5,730	5,890	6,090	6,290	6,490	6,500
\$40,000 - 59,999	1,710	3,450	4,570	5,570	6,570	7,700	7,910	8,110	8,310	8,510	8,710	8,720
\$60,000 - 79,999	1,870	3,600	4,730	5,860	7,060	8,260	8,460	8,660	8,860	9,060	9,260	9,280
\$80,000 - 99,999	1,870	3,730	5,060	6,260	7,460	8,660	8,860	9,060	9,260	9,460	10,430	11,240
\$100,000 - 124,999	2,040	3,970	5,300	6,500	7,700	8,900	9,110	9,610	10,610	11,610	12,610	13,430
\$125,000 - 149,999 \$150,000 - 174,000	2,040	3,970	5,300	6,500	7,700	9,610	10,610	11,610	12,610	13,610	14,900	16,020
\$150,000 - 174,999 \$175,000 - 100,000	2,040	3,970	5,610	7,610	9,610	11,610	12,610	13,750	15,050	16,350	17,650	18,770
\$175,000 - 199,999 \$200,000 - 249,999	2,720 2,900	5,450 5,930	7,580 8,360	9,580 10,660	11,580 12,960	13,870 15,260	15,180 16,570	16,480 17,870	17,780 19,170	19,080 20,470	20,380	21,490 22,880
\$250,000 - 399,999	2,900	6,010	8,440	10,740	13,040	15,340	16,640	17,870	19,170	20,470	21,770	22,960
\$400,000 - 449,999	2,970	6,010	8,440	10,740	13,040	15,340	16,640	17,940	19,240	20,540	21,840	22,960
\$450,000 and over	3,140	6,380	9,010	11,510	14,010	16,510	18,010	19,510	21,010	22,510	24,010	25,330
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Higher Paying Job				Lowe	er Paying	Job Annua	al Taxable	Wage & S	Salary			
Annual Taxable	\$0 -	\$10,000 -	\$20,000 -	\$30,000 -	\$40,000 -	\$50,000 -	\$60,000 -	\$70,000 -	\$80,000 -	\$90,000 -	\$100,000 -	\$110,000 -
Wage & Salary	9,999	19,999	29,999	39,999	49,999	59,999	69,999	79,999	89,999	99,999	109,999	120,000
\$0 - 9,999	\$0	\$620	\$860	\$1,020	\$1,020	\$1,020	\$1,020	\$1,650	\$1,870	\$1,870	\$1,890	\$2,040
\$10,000 - 19,999	620	1,630	2,060	2,220	2,220	2,220	2,850	3,850	4,070	4,090	4,290	4,440
\$20,000 - 29,999	860	2,060	2,490	2,650	2,650	3,280	4,280	5,280	5,520	5,720	5,920	6,070
\$30,000 - 39,999	1,020	2,220	2,650	2,810	3,440	4,440	5,440	6,460	6,880	7,080	7,280	7,430
\$40,000 - 59,999	1,020	2,220	3,130	4,290	5,290	6,290	7,480	8,680	9,100	9,300	9,500	9,650
\$60,000 - 79,999 \$80,000 - 99,999	1,500 1,870	3,700 4,070	5,130 5,690	6,290 7,050	7,480 8,250	8,680 9,450	9,880 10,650	11,080 11,850	11,500 12,260	11,700 12,460	11,900 12,870	12,050 13,820
\$100,000 - 124,999	2,040	4,070	6,070	7,030	8,630	9,430	11,030	12,230	13,190	14,190	15,190	16,150
\$125,000 - 149,999	2,040	4,440	6,070	7,430	8,630	9,980	11,030	13,980	15,190	16,190	17,270	18,530
\$150,000 - 174,999 \$150,000 - 174,999	2,040	4,440	6,070	7,430	9,980	11,980	13,980	15,980	17,420	18,720	20,020	21,280
\$175,000 - 174,939	2,190	5,390	7,820	9,980	11,980	14,060	16,360	18,660	20,170	21,470	22,770	24,030
\$200,000 - 249,999	2,720	6,190	8,920	11,380	13,680	15,980	18,280	20,580	22,090	23,390	24,690	25,950
\$250,000 - 449,999	2,970	6,470	9,200	11,660	13,960	16,260	18,560	20,860	22,380	23,680	24,980	26,230
\$450,000 and over	3,140	6,840	9,770	12,430	14,930	17,430	19,930	22,430	24,150	25,650	27,150	28,600
				-	-		-				-	-



## **Employment Eligibility Verification**

### **Department of Homeland Security**

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 10/31/2022

▶ START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ 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 not			ust complete an	d sign Se	ection 1 of	Form I-9 no later			
Last Name (Family Name)	First Name (Given Na.	me)	Middle Initial	Used (if any)					
Address (Street Number and Name)	Apt. Number	City or Town			State	ZIP Code			
Date of Birth (mm/dd/yyyy)  U.S. Social Sec	Eı	Employee's Telephone Number							
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 a	am (check one of th	e following bo	xes):						
1. A citizen of the United States									
2. A noncitizen national of the United States	(See instructions)								
3. A lawful permanent resident (Alien Reg	gistration Number/USC	S Number):							
4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy):  Some aliens may write "N/A" in the expiration date field. (See instructions)									
Aliens authorized to work must provide only one of the following document numbers to complete Form I-9:  An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.									
Alien Registration Number/USCIS Number:     OR									
2. Form I-94 Admission Number: OR									
3. Foreign Passport Number:									
Country of Issuance:									
Signature of Employee			Today's Dat	e ( <i>mm/dd</i> /	'dd/yyyy)				
Preparer and/or Translator Certification (check one):  I did not use a preparer or translator.  A preparer(s) and/or translator(s) assisted the employee in completing Section 1.									
(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)									
I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.									
Signature of Preparer or Translator				Today's D	Date (mm/d				
Last Name (Family Name)		First Na	me (Given Name)						
Address (Street Number and Name)		State	ZIP Code						

ST0F

Employer Completes Next Page

STOP

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## **Employment Eligibility Verification Department of Homeland Security**

U.S. Citizenship and Immigration Services

**USCIS** Form I-9

OMB No. 1615-0047 Expires 10/31/2022

## Section 2. Employer or Authorized Representative Review and Verification

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

must physically examine one docur of Acceptable Documents.")	ment from List A	OR a combin	ation of one	document f	rom List B a	and one doc	ument fi	rom Lis	st C as listed on the "Lists
,	Last Name (Fa	mily Name)		First Name	e (Given Na	ame)	M.I.	Citizen	ship/Immigration Status
Employee Info from Section 1						4115			
List A Identity and Employment Aut	Ol horization	R	List Iden			AND	1	Emplo	List C syment Authorization
Document Title		Document T	itle			Docume	ent Title		
Issuing Authority	Issuing Auth	nority	ty Issuing Authority						
Document Number	Document N	ment Number Document Number							
Expiration Date (if any) (mm/dd/yy	yy)	Expiration D	ate (if any) (	mm/dd/yyyy	<i>(</i> )	Expirati	on Date	(if any	/) (mm/dd/yyyy)
Document Title									
Issuing Authority		Additiona	l Informatio	n					ode - Sections 2 & 3 t Write In This Space
Document Number									
Expiration Date (if any) (mm/dd/yy	yy)								
Document Title									
Issuing Authority									
Document Number									
Expiration Date (if any) (mm/dd/yy	yy)								
Certification: I attest, under per (2) the above-listed document( employee is authorized to work	s) appear to b	e genuine ar							
The employee's first day of e			/):		(See	instructio	ns for	exem	ptions)
Signature of Employer or Authorize	ed Representativ	ve	Today's Da	te (mm/dd/y	<i>'yyy)</i> Tit	tle of Employ	er or Au	uthorize	ed Representative
Last Name of Employer or Authorized	Representative	First Name of	Employer or i	Authorized Re	epresentative	e Employ	er's Bus	siness	or Organization Name
Employer's Business or Organizati	on Address ( <i>Str</i>	eet Number a	nd Name)	City or Tov	vn		Stat	е	ZIP Code
Section 3. Reverification	and Rehires	(To be com	pleted and	sianed by	emplover	r or authoriz	zed rep	resen	tative.)
A. New Name (if applicable)			,		, ,	B. Date o			· · · · · · · · · · · · · · · · · · ·
Last Name (Family Name)	First N	Name <i>(Given I</i>	Vame)	Mid	dle Initial	Date (mn	n/dd/yyy	y)	
C. If the employee's previous grant continuing employment authorization				provide the	information	n for the doc	ument c	or recei	ipt that establishes
Document Title		Docume	ent Number			Expira	tion Da	ate (if any) (mm/dd/yyyy)	
I attest, under penalty of perjur the employee presented docum									
Signature of Employer or Authorize			Date (mm/c						presentative

# 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	OR	LIST B Documents that Establish Identity	AND	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		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, e color, and address	/e	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.	I-551 printed notation on a machine- readable immigrant visa  Employment Authorization Document that contains a photograph (Form I-766)		<ol> <li>ID card issued by federal, state or loc government agencies or entities, provided it contains a photograph or information such as name, date of bir gender, height, eye color, and addres</li> </ol>	h, 2	(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION  Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status:  a. Foreign passport; and b. Form I-94 or Form I-94A that has		<ol> <li>School ID card with a photograph</li> <li>Voter's registration card</li> <li>U.S. Military card or draft record</li> <li>Military dependent's ID card</li> </ol>	3	Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	the following: (1) The same name as the passport; and		<ul><li>7. U.S. Coast Guard Merchant Mariner Card</li><li>8. Native American tribal document</li></ul>	5	Native American tribal document     U.S. Citizen ID Card (Form I-197)     Identification Card for Use of
	(2) An endorsement of the alien's 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		<ul><li>9. Driver's license issued by a Canadian government authority</li><li>For persons under age 18 who are unable to present a document</li></ul>		Resident Citizen in the United States (Form I-179)  Employment authorization document issued by the Department of Homeland Security
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	limitations identified on the form.  port from the Federated States cronesia (FSM) or the Republic Marshall Islands (RMI) with I-94 or Form I-94A indicating nmigrant admission under the pact of Free Association Between			Esparation of Homoland Gooding

Examples of many of these documents appear in the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

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