



I-9 Instructions

For complete instructions on the I-9 form, please visit www.veridianfiscalsolutions.org/forms_resources.aspx

TO BE COMPLETED BY THE EMPLOYEE

Page 1 Section 1: Employee information and attestation

Please check to ensure the following are complete:

- ✓ Employee's Last Name, First Name, Middle Initial, and Other last names (if applicable).
- ✓ Street address, Apt # (if applicable), City, State and Zip Code
- ✓ Date of Birth, Social Security Number, Email Address and Phone Number

Section 1. Employee Information and Attestation <i>(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.)</i>					
Last Name <i>(Family Name)</i>		First Name <i>(Given Name)</i>		Middle Initial	Other Last Names Used <i>(if any)</i>
Test		John		A	Doe
Address <i>(Street Number and Name)</i>			Apt. Number	City or Town	State ZIP Code
123 Happy Lane			1	Anywher	IA 12345
Date of Birth <i>(mm/dd/yyyy)</i>	U.S. Social Security Number		Employee's E-mail Address		Employee's Telephone Number
1/1/00	1 2 3 - 4 5 - 6 7 8 9		johntest@internet.com		319-555-5555

When completing the attestation section only check one of the boxes next to numbers 1-4. Only choose **ONE**

- 1.) A citizen of the United States
- 2.) A non-citizen national of the United States
- 3.) A lawful permanent resident (Alien Registration Number/USCIS Number)
- 4.) An alien authorized to work

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 boxes):

<input checked="" type="checkbox"/>	1. A citizen of the United States	Only check one box. What you check should be listed under citizenship status in Section #2
<input type="checkbox"/>	2. A non-citizen national of the United States	
<input type="checkbox"/>	3. A lawful permanent resident (Alien Registration Number/USCIS Number)	
<input type="checkbox"/>	4. An alien authorized to work in the United States (Expiration date: _____ 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.

1. Alien Registration Number/USCIS Number: _____
OR

2. Form I-94 Admission Number: _____
OR

3. Foreign Passport Number: _____
Country of Issuance: _____

QR Code - Section 1
Do Not Write In This Space



Make sure the employee signs and dates the I-9 on page 1

Signature of Employee EMPLOYEE SIGNATURE HERE	Today's Date (mm/dd/yyyy) 5/1/18
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If an employee does not use a translator, they should check "I did not use a preparer or translator."

Preparer and/or Translator Certification (check one):	
<input checked="" type="checkbox"/> I did not use a preparer or translator.	<input type="checkbox"/> A preparer(s) and/or translator(s) assisted the employee in completing Section 1.
<i>(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)</i>	

If an employee does use a translator or preparer to assist them with the I-9, they should check the box, indicating they had a preparer and /or translator assist the employee in completing section 1. The preparer/translator should complete the section with their information.

It must include the following:

- ✓ Signature of Preparer or Translator
- ✓ Date
- ✓ Last Name and First Name
- ✓ Address, City, State and Zip Code

Preparer and/or Translator Certification (check one):			
<input type="checkbox"/> I did not use a preparer or translator.		<input checked="" type="checkbox"/> A preparer(s) and/or translator(s) assisted the employee in completing Section 1.	
<i>(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)</i>			
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 PREPARER'S SIGNATURE		Today's Date (mm/dd/yyyy) 5/1/18	
Last Name (Family Name) Preparer		First Name (Given Name) The	
Address (Street Number and Name) 123 Preparer's Way		City or Town Anywhere	State IA
		ZIP Code 12345	

TO BE COMPLETED BY THE EMPLOYER OF RECORD

Section 2 page 2: Employer or Authorized Representative Review and Verification

This section of the form is filled out by the employer not the applicant. The employer's role is to verify the documents supplied by the employee and provide the necessary information in section 2.

Please check to ensure the following are complete:

- ✓ Employee last name, first name, MI, and Citizenship/Immigration Status from section A



Section 2. Employer or Authorized Representative Review and Verification				
<small>(Employers or their authorized representative must complete and sign Section 2 within 3 business days of must physically examine one document from List A OR a combination of one document from List B and one document from List C.)</small>				<small>This should match the box checked by the employee on page 1</small>
Employee Info from Section 1	Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
	Test	John	A	Citizen of the US

An employee can provide documents from List A or List B and List C. If an employee provides a document from (page 3 of the I-9 has a list of acceptable documents)

- List A, they do not need to provide anything from List B and C.
- List B, they must provide a document from List C also.

The employer must check the documents to ensure they are valid and not expired and check for authenticity. **The information from each document must be listed under the proper columns.**

PLEASE NOTE: The employee can provide any documents listed in column A. The below is just an example. Please remember if list A is complete then nothing must be in columns B and C.

List A
Identity and Employment Authorization
Document Title U.S. Passport
Issuing Authority Department of State
Document Number ABC1123456789
Expiration Date (if any)(mm/dd/yyyy) 1/1/20

PLEASE NOTE: The employee can provide any documents listed in columns B and C. The below is just an example. Please remember if list B is complete than list C should also be complete.

List B	AND	List C
Identity		Employment Authorization
Document Title Driver's License		Document Title Social Security Card
Issuing Authority Iowa DOT		Issuing Authority Social Security Administration
Document Number 123456789		Document Number 123-45-6789
Expiration Date (if any)(mm/dd/yyyy) 1/1/20		Expiration Date (if any)(mm/dd/yyyy) N/A



Employee's first day of employment

Please enter the employee first date of work. This is required for this form to be considered complete.

Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, 2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): (See instructions for exemptions)

Employer's Information

This section must be completed by the employer of record and make sure it includes the following:

- ✓ Employer Signature
- ✓ Date
- ✓ Last Name, First Name, Name of Business (this is the employer's first and last name)
- ✓ Business Address (this is the employer's address city, state and zip code)

Signature of Employer or Authorized Representative EMPLOYER SIGN HERE		Today's Date (mm/dd/yyyy) 5/1/18	Title of Employer or Authorized Representative Household Employer	
Last Name of Employer or Authorized Representative Duck	First Name of Employer or Authorized Representative Donald	Employer's Business or Organization Name Donald Duck		
Employer's Business or Organization Address (Street Number and Name) 222 Happy Lane		City or Town Anywhere	State IA	ZIP Code 12345