



Form I-9 Purpose and Completion





Employment Eligibility Verification
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
OMB No. 1615-0047
Expires 07/31/2026

START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the [instructions](#).

ANTI-DISCRIMINATION NOTICE: All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in Section 1, or specify which acceptable documentation employees must present for Section 2 or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

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.

Last Name (Family Name)		First Name (Given Name)		Middle Initial (if any)	Other Last Names Used (if any)
Address (Street, Rural Route, P.O. Box, etc.) (Include Apt. No., Suite No., or P.O. Code)					
Date of Birth (mm/dd/yyyy)		U.S. Social Security Number		Employee's Email Address	Employee's Telephone Number
<p>I am aware that providing false or fraudulent information on this form is a violation of the instructions. I understand the consequences of providing false information, including the use of false documents, in connection with the completion of this form. I attest:</p> <p><input type="checkbox"/> 1. I am a U.S. citizen.</p> <p><input type="checkbox"/> 2. I am a noncitizen national of the United States. (See instructions.)</p> <p><input type="checkbox"/> 3. I am a lawful permanent resident. (Enter USCIS or A-Number.)</p> <p>My immigration status is: <input type="checkbox"/> U.S. citizen <input type="checkbox"/> noncitizen national <input type="checkbox"/> lawful permanent resident (Enter USCIS or A-Number) (Exp. date, if any) _____</p> <p>USCIS Number _____ or Form I-9 Identification Number _____ Foreign Passport Number and Country of Issuance _____</p> <p>Signature of Employee _____ Today's Date (mm/dd/yyyy) _____</p> <p>If a permanent resident, enter the date of entry into the United States (mm/dd/yyyy) on Page 3.</p>					

Section 2. Employer Review and Verification: Employers or their authorized representative must complete and sign Section 2 within three business days after the employee's first day of employment, and must physically examine, or examine consistent with an alternative procedure authorized by the Secretary of DHS, documentation from List A OR a combination of documentation from List B and List C. Enter any additional documentation information in the space below.

Document Title 1	Issuing Authority	Additional Information
Document Title 2 (if any)	Issuing Authority	
Document Title 3 (if any)	Issuing Authority	
Document Title 4 (if any)	Issuing Authority	
Document Title 5 (if any)	Issuing Authority	
Document Title 6 (if any)	Issuing Authority	
Document Title 7 (if any)	Issuing Authority	
Document Title 8 (if any)	Issuing Authority	
Document Title 9 (if any)	Issuing Authority	
Document Title 10 (if any)	Issuing Authority	
<input type="checkbox"/> Check here if you used an alternative procedure authorized by DHS to examine documents.		
Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee, (2) the above-listed documentation appears 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.		First Day of Employment (mm/dd/yyyy): _____
Last Name, First Name and Title of Employer or Authorized Representative		Signature of Employer or Authorized Representative
Employer's Business or Organization Name		Today's Date (mm/dd/yyyy)
Employer's Business or Organization Address, City or Town, State, ZIP Code		

For reverification or rehire, complete [Supplement B, Reverification and Rehire](#) on Page 4.

Agenda

Purpose of Form I-9.

Employer Responsibilities.

Completing Form I-9.

Form I-9 Retention Requirements

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Purpose of Form I-9



Form I-9 is used for verifying the identity and employment authorization of individuals hired for employment in the United States.



All U.S. employers must ensure proper completion of Form I-9 for each individual they hire for employment in the United States. This includes citizens and noncitizens.



Employers may designate an authorized representative to complete the Form I-9 on the employer's behalf.



[Employment Eligibility Verification | USCIS](#)



Employer Responsibilities

All employers must:

- Make the instructions for Form I-9 and Lists of Acceptable Documents available to the employee.
- Ensure that the employee completes **Section 1** no later than their first day of work.
- Complete **Section 2** within three business days after the employee's first day of employment. If an individual is hired for less than three business days, Section 2 must be completed no later than the first day of employment.



All employers must:

- Complete Supplement B, Reverification and Rehire when applicable.
- Leave a field blank if it does not apply and allow employees to leave fields blank in Section 1, where appropriate.
- Retain completed forms. Employers are not required to retain or store the page(s) containing the Lists of Acceptable Documents or the instructions for Form I-9.

Completing Form I-9

Section 1

Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

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.					
Last Name (Family Name)		First Name (Given Name)		Middle Initial (if any)	Other Last Names Used (if any)
Address (Street Number and Name)		Apt. Number (if any)	City or Town		State ▼
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number		Employee's Email Address		Employee's Telephone Number
I am aware that federal law provides for imprisonment and/or fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or immigration status, is true and correct.	Check one of the following boxes to attest to your citizenship or immigration status (See page 2 and 3 of the instructions.):				
	<input type="checkbox"/> 1. A citizen of the United States				
	<input type="checkbox"/> 2. A noncitizen national of the United States (See Instructions.)				
	<input type="checkbox"/> 3. A lawful permanent resident (Enter USCIS or A-Number.)				
	<input type="checkbox"/> 4. A noncitizen (other than Item Numbers 2. and 3. above) authorized to work until (exp. date, if any)				
If you check Item Number 4., enter one of these:					
USCIS A-Number		OR	Form I-94 Admission Number	OR	Foreign Passport Number and Country of Issuance
Signature of Employee				Today's Date (mm/dd/yyyy)	
If a preparer and/or translator assisted you in completing Section 1, that person MUST complete the Preparer and/or Translator Certification on Page 3.					



Section 1

The employee may use a translator or preparer to complete Section 1 of the form. However, the form must be signed by the employee, and the translator or preparer must complete Supplement A on page 3 of the Form I-9.

Social Security numbers are not required on Form I-9 unless the employer uses E-Verify.

Section 2

If a preparer and/or translator assisted you in completing Section 1, that person MUST complete the Preparer and/or Translator Certification on Page 3.				
Section 2. Employer Review and Verification: Employers or their authorized representative must complete and sign Section 2 within three business days after the employee's first day of employment, and must physically examine, or examine consistent with an alternative procedure authorized by the Secretary of DHS, documentation from List A OR a combination of documentation from List B and List C. Enter any additional documentation in the Additional Information box; see Instructions.				
	List A	OR	List B	AND List C
Document Title 1				
Issuing Authority				
Document Number (if any)				
Expiration Date (if any)				
Document Title 2 (if any)		Additional Information <div style="border: 1px solid black; height: 200px; width: 100%;"></div> <input type="checkbox"/> Check here if you used an alternative procedure authorized by DHS to examine documents.		
Issuing Authority				
Document Number (if any)				
Expiration Date (if any)				
Document Title 3 (if any)				
Issuing Authority				
Document Number (if any)				
Expiration Date (if any)				
Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee, (2) the above-listed documentation appears 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.			First Day of Employment (mm/dd/yyyy): <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
Last Name, First Name and Title of Employer or Authorized Representative <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		Signature of Employer or Authorized Representative <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		Today's Date (mm/dd/yyyy) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Employer's Business or Organization Name <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		Employer's Business or Organization Address, City or Town, State, ZIP Code <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		

For reverification or rehire, complete [Supplement B, Reverification and Rehire](#) on Page 4.



The employer may designate an authorized representative to review an employee's documents and complete Section 2.

Employers who participate in E-Verify may view the employee's documents virtually under certain conditions.

Acceptable Documents

The new employee must present original and unexpired document(s) from the *Lists of Acceptable Documents* to prove identity and employment authorization.

LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

* Documents extended by the issuing authority are considered unexpired.

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

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

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
1. U.S. Passport or U.S. Passport Card		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		1. 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 (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		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		2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		3. School ID card with a photograph		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
4. Employment Authorization Document that contains a photograph (Form I-766)		4. Voter's registration card		4. Native American tribal document
5. For an individual temporarily authorized to work for a specific employer because of his or her status or parole: a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and (2) An endorsement of the individual's status or parole as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		5. U.S. Military card or draft record		5. U.S. Citizen ID Card (Form I-197)
		6. Military dependent's ID card		6. Identification Card for Use of Resident Citizen in the United States (Form I-179)
		7. U.S. Coast Guard Merchant Mariner Card		7. Employment authorization document issued by the Department of Homeland Security For examples, see Section 7 and Section 13 of the M-274 on uscis.gov/i-9-central . The Form I-766, Employment Authorization Document, is a List A, Item Number 4. document, not a List C document.
		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		
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				

Documents from List A documents show both identity and employment authorization.

Documents from List B show identity only

Documents from List C show employment authorization only.

Employees may present one document for List A OR one document for List B *and* one document for List C



Employers must accept any document(s) from the employee that are included on the Lists of Acceptable Documents and that reasonably appear on their face to be genuine and to relate to the person.



Employers may not specify which document(s) an employee should present.



Employers must examine the documents presented and fully complete Section 2 by recording the title, issuing authority, number and expiration date (if any) of the document(s).

Supplement A - Preparer and/or Translator Certification for Section 1



**Supplement A,
Preparer and/or Translator Certification for Section 1**
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
Supplement A
OMB No. 1615-0047
Expires 07/31/2026

Last Name (Family Name) from Section 1.	First Name (Given Name) from Section 1.	Middle initial (if any) from Section 1.

Instructions: This supplement must be completed by any preparer and/or translator who assists an employee in completing Section 1 of Form I-9. The preparer and/or translator must enter the employee's name in the spaces provided above. Each preparer or translator must complete, sign, and date a separate certification area. Employers must retain completed supplement sheets with the employee's completed Form I-9.

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		Date (mm/dd/yyyy)	
Last Name (Family Name)	First Name (Given Name)	Middle Initial (if any)	
Address (Street Number and Name)	City or Town	State	ZIP Code

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

Supplement A must be completed by any preparer and/or translator who assists an employee in completing Section 1 of Form I-9.

The preparer and/or translator must enter the employee's name at the top of the page.

Each preparer or translator must complete, sign, and date a separate certification area. Employers must retain the completed supplement sheet(s) with the employee's completed Form I-9.

Supplement B Reverification and Rehire



**Supplement B,
Reverification and Rehire (formerly Section 3)**
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
Supplement B
OMB No. 1615-0047
Expires 07/31/2026

Last Name (Family Name) from Section 1.	First Name (Given Name) from Section 1.	Middle initial (if any) from Section 1.

Instructions: This supplement replaces Section 3 on the previous version of Form I-9. Only use this page if your employee requires reverification, is rehired within three years of the date the original Form I-9 was completed, or provides proof of a legal name change. Enter the employee's name in the fields above. Use a new section for each reverification or rehire. Review the Form I-9 instructions before completing this page. Keep this page as part of the employee's Form I-9 record. Additional guidance can be found in the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#)

Date of Rehire (if applicable)	New Name (if applicable)		
Date (mm/dd/yyyy)	Last Name (Family Name)	First Name (Given Name)	Middle Initial
Reverification: If the employee requires reverification, your employee can choose to present any acceptable List A or List C documentation to show continued employment authorization. Enter the document information in the spaces below.			
Document Title	Document Number (if any)	Expiration Date (if any) (mm/dd/yyyy)	
I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented documentation, the documentation I examined appears to be genuine and to relate to the individual who presented it.			

Reverification Requirements

Reverification means updating the employee's work authorization; this is done only when an expiration date is entered in Section 1, List A or C (Employment authorization). Reverification must be done on or before the expiration date recorded in Section 1.

The employee must present a document that shows either an extension of the initial employment authorization or new employment authorization. This can be any document from Lists A or C.

Employees cannot work beyond the date their employment authorization expires without reverifying their authorization to work in the U.S.

Supplement B Reverification and Rehire

Employers must complete this page if an employee:

- Requires reverification of authorization to work.
- Is rehired within three years of the date the original Form I-9 was completed.
- Provides proof of a legal name change.

Enter the employee's name at the top of the page and complete the relevant section(s). Use a new section for each reverification or rehire. Retain Supplement B with the employee's completed Form I-9.

Rehires



If an employee is rehired within three years of the date the Form I-9 was originally completed, employers have a choice of completing Appendix B or by completing a new Form I-9 for the rehire.



If a new version of Form I-9 is available, employers must complete the new version of Form I-9 for rehires.



Retention Requirements



Employers must retain an employee's completed Form I-9 for as long as the individual works for the employer.



Employers may choose to make and retain copies of the document(s) reviewed and attach the copies to the Form I-9 but are not required to do so unless the employer participates in E-Verify.



Once the individual's employment has terminated, the employer must determine how long after termination the Form I-9 must be retained, which is either **three years after the date of hire, or one year after the date employment is terminated, whichever is later.**

Penalties



For I-9 paperwork violations, the penalties range **from \$272 to \$2,701** for the first offense for substantive violations or uncorrected technical errors.

For recruiting, referral, and rehiring unauthorized non-citizens violations, the penalties range from \$676 to \$5,404 for first offenses for each knowingly employed unauthorized workers.

The penalties range from \$5,404 to \$27,108 for second and subsequent offenses

If employers try to trick ICE, or ignore credible warnings, they risk serious fines. Companies can also be punished for “subsequent offenses” even if their prior punishment wasn’t in the recent past.