

Employment Eligibility Verification

Department of Homeland Security U.S. Citizenship and Immigration Services If you attend BK STEAM, please select Brooklyn Navy Yard STEAM and NOT your home school. 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 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 (Family Name)		First Name <i>(Given Name)</i>				Middle Initial	Other Last Names Used (if any)			
Address (Street Number and Name)			Apt. Number		City or Town			State	ZIP Code	
Date of Birth <i>(mm/dd/yyyy)</i>	U.S. Social Sec	rity Number Employee's E-mail Addr			ess	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 am (check one of the following boxes): You MUST select ONE

1. A citizen of the United States						
2. A noncitizen national of the United States (See instructions)						
3. A lawful permanent resident (Alien Registration Number/USCIS 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 compl An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign		QR Code - Section 1 Do Not Write In This Space				
Alien Registration Number/USCIS Number: OR S. Form I-94 Admission Number: OR OR						
3. Foreign Passport Number: Country of Issuance:						
Signature of Employee Today's I		Date (<i>mm/dd/yyyy</i>)				
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)ate <i>(mm/d</i>	d/yyyy)
Last Name (Family Name)	First Name (Given Name)				
Address (Street Number and Name)	City or Town			State	ZIP Code

STOP

STOP