

**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 than the first day of emplo						st complete and	d sign Se	ection 1 c	f Form I-9 no later
Last Name (Family Name) Fire			First Name (Given Name)			Middle Initial	Other Last Names Used (if any)		
Bulldog			Brutus			н			
Address (Street Number and Name)			Apt. Number City or Town					State	ZIP Code
1 Ferris State					Big Rapid	ls		MI	49307
Date of Birth (mm/dd/yyyy)	U.S. Social Sec	urity Num	ber	Employe	ee's E-mail Addr	ess	E	mployee's	Telephone Number
08/08/1930	XXX-X	x - x>	XX	brutu	sbulldog	@ferris.edu	ı 5	55-555	5-5555

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):

2. A noncitizen national of the United States (See instructions)				
3. A lawful permanent resident (Alien Registration Number/USCI	S Number):			
4. An alien authorized to work until (expiration date, if applicable,				
Some aliens may write "N/A" in the expiration date field. (See ins	structions)			
Aliens authorized to work must provide only one of the following docu An Alien Registration Number/USCIS Number OR Form I-94 Admissio			No	QR Code - Section 1 Do t Write In This Space
1. Alien Registration Number/USCIS Number:				
OR				
2. Form I-94 Admission Number: 12345678912				
OR				
3. Foreign Passport Number:				
Country of Issuance: Ferrisland				
Signature of Employee Brutus Bulldog		Today's Date (mm/do	<sup>d/yyyy)</sup> ()	1/16/2017
Brutus Bulldog	ne):	Today's Date (mm/do	<sup>d/yyyy)</sup> ()	1/16/2017
Signature of Employee Brutus Bulldog Preparer and/or Translator Certification (check of I did not use a preparer or translator. A preparer(s) and/or translator.	•		0	
Brutus Bulldog Preparer and/or Translator Certification (check o	anslator(s) assisted the	employee in completir	ng Section 1	I.
Buildog         Preparer and/or Translator Certification (check o         I did not use a preparer or translator.         A preparer(s) and/or tra         (Fields below must be completed and signed when preparers and tattest, under penalty of perjury, that I have assisted in the	nslator(s) assisted the nd/or translators ass	employee in completir sist an employee in c	ng Section 1	l. g Section 1.)
Building         Preparer and/or Translator Certification (check of a preparer or translator.         I did not use a preparer or translator.         A preparer(s) and/or translator.         (Fields below must be completed and signed when preparers and the preparers and th	nslator(s) assisted the nd/or translators ass	employee in completir sist an employee in a tion 1 of this form	ng Section 1	l. g Section 1.) to the best of my
Buildog         Preparer and/or Translator Certification (check o         I did not use a preparer or translator.         A preparer(s) and/or tra         (Fields below must be completed and signed when preparers and tattest, under penalty of perjury, that I have assisted in the knowledge the information is true and correct.	nslator(s) assisted the nd/or translators ass	employee in completir sist an employee in a tion 1 of this form	ng Section 1 completing and that	l. g Section 1.) to the best of my
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## **Employment Eligibility Verification**

## **Department of Homeland Security**

U.S. Citizenship and Immigration Services

Section 2. Employer or A	Authorized	Representative Re	eview and Verif	fication				
(Employers or their authorized repr must physically examine one docu								
"Lists of Acceptable Documents.")	ment nom List /	A OK a compination of one	document nom List B	anu one uc	Journer	it from List C as listed on the		
Employee Info from Section 1	Last Name (Fa	amily Name)	First Name (Given Na	ame)	M.I.	Citizenship/Immigration Status		
	Bulldog		Brutus		Н	4		
List A	-	R List	-	AND		List C		
Identity and Employment Aut	horization	Ident	ity			Employment Authorization		
Document Title Passport		Document Title		Docum	nent Tit	le		
Issuing Authority Ferrisland		Issuing Authority		Issuinę	Issuing Authority			
Document Number J1234675		Document Number		Docun	nent Nu	umber		
Expiration Date (if any)(mm/dd/yyy 08/08/2020	<i>(</i> y)	Expiration Date (if any)(n	nm/dd/yyyy)	Expira	tion Da	ate (if any)(mm/dd/yyyy)		
Document Title I-94		Additional Informatio	n			Do Not Write In This Space		
Issuing Authority Dept of Homeland Security								
Document Number 123456789								
Expiration Date (if any)(mm/dd/yyy 08/08/2020	<i>(</i> y)							
Document Title I-20	*							
Issuing Authority SEVIS		OPTION	IAL					
Document Number N0085464135156153								
Expiration Date (if any)(mm/dd/yyy 08/08/2020	(Y) <b>k</b>							

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*): <u>01/31/2017</u> (See instructions for exemptions)

Signature of Employer or Authorized Represer Debbera Lunsted				Title of Employer or Authorized Representative Student Employment Rep					
Last Name of Employer or Authorized Representative <b>Lunsted</b>	me of Employer or Authorized entative <b>Debbera</b>				Employer's Business or Organization Name Ferris State University				
Employer's Business or Organization Address 1201 S. State Street CSS 101	(Street Number	umber and Name) City or Town Big Rapids					State MI	ZIP Code 49307	
Section 3. Reverification and Rehi	i <b>res</b> (To be co	mpleted and	l signed by e	employe	er or au	uthorized	l represe	entative.)	
A. New Name (if applicable)				B. Date of			Rehire (if applicable)		
Last Name (Family Name) Fi	n Name)	Name) Middle Initial			Date (mm/dd/yyyy)				
<b>C.</b> If the employee's previous grant of employm continuing employment authorization in the spa			, provide the i	nformatio	on for th	ne docum	ent or rec	eipt that establishes	
Document Title			Document Number			E	Expiration Date (if any) (mm/dd/yyyy)		
I attest, under penalty of perjury, that to t	the best of my	knowledge	, this employ	yee is a	uthoria	zed to w	ork in th	e United States, and	
if the employee presented document(s), t	the document	(s) I have ex	amined app	ear to b	be genu	uine and	to relate	e to the individual.	
Signature of Employer or Authorized Representative Today's			e (mm/dd/yyyy) Name of Er			yer or Aut	thorized F	Representative	

## 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 O		LIST B		LIST C			
	R Documents that Establish Both Identity and Employment Authorization		Documents that Establish Identity		Documents that Establish Employment Authorization			
	Employment Authorization		AND					
	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, eye color, and address	1.	<ul> <li>A Social Security Account Number card, unless the card includes one of the following restrictions:</li> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> </ul>			
	I-551 printed notation on a machine- readable immigrant visa	2.	ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or		(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION			
4.	Employment Authorization Document that contains a photograph (Form I-766)		information such as name, date of birth, gender, height, eye color, and address	2.	Certification of Birth Abroad issued by the Department of State (Form FS-545)			
5.	For a nonimmigrant alien authorized	3.	School ID card with a photograph	3.	Certification of Report of Birth			
	to work for a specific employer because of his or her status:		Voter's registration card		issued by the Department of State (Form DS-1350)			
	a. Foreign passport; and	or Form I-94A that has 6. Military dependent's ID card	4.					
	b. Form I-94 or Form I-94A that has the following:				certificate issued by a State, county, municipal authority, or			
	(1) The same name as the passport; and	1.	Card		territory of the United States bearing an official seal			
	(2) An endorsement of the alien's	8.	Native American tribal document	5.	Native American tribal document			
	nonimmigrant status as long as that period of endorsement has	9.	Driver's license issued by a Canadian government authority	6.				
	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.	or	For persons under age 18 who are unable to present a document listed above:	7.	Identification Card for Use of Resident Citizen in the United States (Form I-179)			
6.				8.	Employment authorization document issued by the			
	Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form		. School record or report card		Department of Homeland Security			
	I-94 or Form I-94A indicating	11	. Clinic, doctor, or hospital record					
n C	nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI	12	. Day-care or nursery school record					

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

Refer to the instructions for more information about acceptable receipts.