



# 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 this form. See below and the [Instructions](#).

**ANTI-DISCRIMINATION:** Employees must be treated equally regardless of race, color, sex, religion, national origin, or ancestry. Employers cannot ask employees for documentation to present for Form I-9. Employers cannot ask employees to present documentation differently based on their citizenship, immigration status, or national origin may be illegal.

**Section 1 is filled out by the employee**

**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) <b>Bulldog</b>		First Name (Given Name) <b>Brutus</b>		Middle Initial (if any) <b>T</b>	Other Last Names Used (if any) <b>N/A</b>	
Address (Street Number and Name) <b>123 Ferris State Drive</b>			Apt. Number (if any)	City or Town <b>Big Rapids</b>		State <b>MI</b>
Date of Birth (mm/dd/yyyy) <b>08/08/1930</b>		U.S. Social Security Number <b>X X X X X X X X</b>		Employee's Email Address <b>brutus@ferris.edu</b>		Employee's Telephone Number <b>555-555-5555</b>
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 checked="" 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)						
Signature of Employee <b>Brutus T. Bulldog</b>		USCIS A-Number		OR	Form I-94 Admission Number	OR
Today's Date (mm/dd/yyyy) <b>10/30/2023</b>		Foreign Passport Number and Country of Issuance				

**Section 2 is filled out by the employer**

If a preparer and/or translator assisted you in completing this form, you **MUST** complete the [Preparer and/or Translator Certification](#) on Page 3.

**Section 2. Employer Review and Verification:** 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.

Document Title	List A	OR	List B	AND	List C
Document Title 1			<b>Driver's License</b>		<b>Social Security Card</b>
Issuing Authority			<b>Michigan</b>		<b>Social Security Admin.</b>
Document Number (if any)			<b>B-000-000-000-000</b>		<b>XXX-XX-XXXX</b>
Expiration Date (if any)			<b>08/08/2022</b>		<b>N/A</b>
Document Title 2 (if any)	<b>Additional Information</b>				
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)					

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.

Last Name, First Name and Title of Employer or Authorized Representative <b>A. Person, HR Administrator</b>		Signature of Employer or Authorized Representative <b>A. Person</b>		Today's Date (mm/dd/yyyy) <b>10/30/2023</b>
Employer's Business or Organization Name <b>Ferris State University</b>		Employer's Business or Organization Address, City or Town, State, ZIP Code <b>1201 S. State Street, Big Rapids, MI 49307</b>		

**If the I-9 is completed outside of the HR office, you must send the original to HR with the additional hiring paperwork. Do not keep copies of the I-9 in your department.**