

Formulario I-9

El Servicio de Ciudadanía e Inmigración de los Estados Unidos (USCIS) es parte del Departamento de Seguridad Nacional de los Estados Unidos (DHS). El formulario I-9 es para asegurarse de que pueda trabajar en los Estados Unidos.

El empleado debe proporcionar copias de sus documentos de verificación de empleo (consulte I9 para obtener una lista completa de los documentos de calificación). El nombre del empleado debe coincidir con el nombre en los documentos que proporcione para verificar su elegibilidad para el empleo. Los documentos proporcionados no pueden estar vencidos.

Traducción

El cumplimiento de I-9 requiere que el empleador proporcione el formulario I9 en inglés si el inglés es el idioma predominante que se habla en el estado. Si necesita ayuda con la traducción para completar el formulario, siga las instrucciones a continuación.

Direcciones:

Si completó la página 1 con la ayuda de un preparador o un traductor para completar el formulario, marque la casilla junto a la declaración: "Un preparador(es) y/o traductor(es) ayudo al empleado a completar la Sección 1.

Complete la siguiente información (vea la imagen de arriba y las instrucciones a continuación):

- Firma del Preparador/Traductor
- Escriba el nombre completo del Preparador/Traductor
- Dirección física actual del Preparador/Traductor
- Escriba la fecha en que el Preparador/Traductor ayudó a completar este formulario

6 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 <i>Jane Doe</i>		Today's Date (mm/dd/yyyy) 1/23/2017	
Last Name (Family Name) Doe		First Name (Given Name) Jane	
Address (Street Number and Name) 123 Main Street		City or Town Washington	State ZIP Code DC 20000



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

USCIS
Form I-9
 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 *(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	Other Last Names Used (if any)	
Address (Street Number and Name)			Apt. Number	City or Town		State ZIP Code
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number		Employee's E-mail Address		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):

<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 (Alien Registration Number/USCIS Number): _____
<input type="checkbox"/> 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 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

Signature of Employee	Today's Date (mm/dd/yyyy)
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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 Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State ZIP Code

STOP Employer Completes Next Page **STOP**