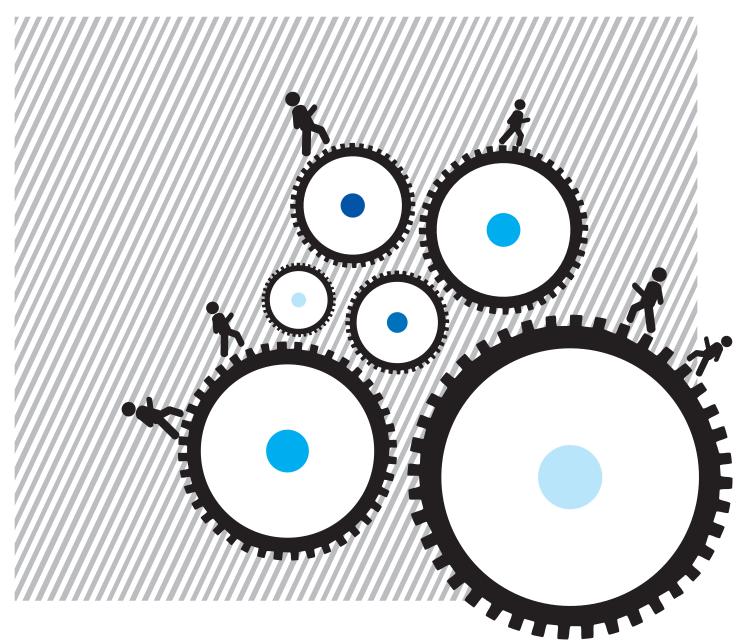
### Beginner/Intermediate 2011-2012 STUDENT EDITION

# **THE RIGHT TO WORK** Understanding Immigrant Employment Rights

## A Workbook for ESOL Classes





NYC COMMISSION ON HUMAN RIGHTS MICHAEL R. BLOOMBERG, Mayor | PATRICIA L. GATLING, Commissioner / Chair

**NEW YORK IMMIGRATION COALITION** 

THE CITY UNIVERSITY OF NEW YORK ADULT LITERACY / GED / ESL PROGRAM

Funding for this curriculum and workbook provided by US Office of Special Counsel for Immigration-Related Unfair Employment Practices, Civil Rights Division, US Department of Justice.

# **THE RIGHT TO WORK** Understanding Immigrant Employment Rights

A Workbook for ESOL Classes

**NEW YORK CITY COMMISSION ON HUMAN RIGHTS** 

Michael R. Bloomberg, Mayor Patricia L. Gatling, Commissioner/Chair

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## **The Right to Work**

#### **Understanding Immigrant Employment Rights**

A Workbook for ESOL Classes | Beginner/Intermediate Level

### Introduction

These lessons will educate immigrant workers about their protections against discrimination under the Immigration and Nationality Act (INA) and NYC Human Rights Law. It also provides resources to contact if discrimination occurs.

**The Immigration and Nationality Act (INA)** protects U.S. citizens and certain work-authorized individuals from employment discrimination based upon citizenship or immigration status. The INA protects all work-authorized individuals from national origin discrimination, unfair documentary practices relating to the employment eligibility verification process, and from retaliation.

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ESOL Professional Development Coordinator, CUNY Adult Literacy/GED/ESL Program

#### **Editors**

Lee Hudson, Ph.D. Alex Korkhov, M.S. Kathleen Bracken

#### Special thanks to:

*Martie Flores, Chandana Mahadeswaraswamy, Paula Michelin, Lori Richards,* the Center for Immigrant Education and Training, LaGuardia Community College and the Adult Learning Center of NYC College of Technology. *Bruce Friedman, Esq.,* Office for Civil Rights and Civil Liberties and **Yvette M. LaGonterie** U.S. Citizenship and Immigration Services, U.S. Department of Homeland Security.

Reviewer

Director

Marilyn J. Rymniak

Literacy Assistance Center

Curriculum Development Services

#### Acknowledgments

Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, U.S. Department of Justice is responsible for enforcing the anti-discrimination provisions of the Immigration and Nationality Act (INA), 8 U.S.C. § 1324b. OSC conducts an outreach and education program aimed at educating employers, potential victims of discrimination, and the general public about their rights and responsibilities under the INA's anti-discrimination and employer sanctions provisions.

The City University of New York Adult Literacy/GED/

**ESL Program** operates on 14 campuses of The City University of New York (CUNY) and has been in existence for over 30 years. With an average enrollment of 10,000 students a year, hundreds of thousands of New York City adults have learned to speak English, read and write and do math with greater facility, and prepare for high school credentialing through the GED Exam. Many students have also made strengthened transitions to college through the CUNY college transition programs. In addition to classes in reading/writing, math, ESOL and GED preparation, different CUNY campus programs offer instruction in a variety of special topics courses in such areas as health, family literacy, or work and college-going preparation. **www.cunv.edu** 

#### **The Literacy Assistance Center** has provided services for adult education programs since 1983. Its data management support, professional development programs, and technical assistance enable these programs to improve the quality of their instruction and the efficiency of their organization. The LAC also works with a wide range of other cultural, educational, financial, health, and legal agencies and institutions. It assists these groups in improving their communication skills so that their clients with limited literacy can seize opportunities

www.lacnyc.org

available to them and become full participants in the

broader community.

#### New York City Commission On Human Rights (CCHR)

enforces the NYC Human Rights Law, one of the most comprehensive civil rights laws in the nation. The Law prohibits discrimination in employment, housing and public accommodations based on race, color, creed, age, national origin, alienage or citizenship status, gender (including gender identity and sexual harassment), sexual orientation, disability, marital status, or partnership status. In addition, the Law affords protection against discrimination in employment based on arrest or conviction record and status as victim of domestic violence, stalking or sex offenses. In housing, the Law affords additional protections based on lawful occupation, any lawful source of income, and family status. The City Human Rights Law also prohibits retaliation and biasrelated harassment. The Commission also conducts extensive education about the law for the general public.

#### www.nyc.gov/cchr

**New York Immigration Coalition** is an umbrella policy organization for approximately 200 groups in New York State that work with "newcomers" to the US. The NYIC was founded in 1987 and has evolved into a powerful advocacy voice, analyzing the impact of immigration policy proposals, promoting and protecting the rights of immigrants and their family members, improving newcomers' access to services, resolving problems with public agencies, and mobilizing member groups to respond to public issues and community needs.

#### **Contributors**

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www.thenyic.org

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## **Working in the United States**

Immigrant Employment Rights Part I

## • VIDEO 1 | Tomás needs a job.



### 1. Watch Video 1.

- Who do you see?
- What **documents** do you see?
- What is the problem?

### 2. Talk about the Video.

Circle **YES** or **NO**.

A man needs a job.	YES	NO	
The man goes to a deli.	YES	NO	
The man talks to the boss.	YES	NO	
The boss asks the man for his documents.	YES	NO	
The man shows the boss his documents.	YES	NO	
The man gets the job.	YES	NO	



### 3. What is the problem?

Complete the dialogue.



Sr. Santos



Tomás

Sr. Santos:		
Do you have your		with you?
Tomás:		
No, but I have my	and	·
Sr. Santos:		
That's good but I need to see your		

## Complete the sentences.

Tomás is the	employer	job applicant
Sr. Santos is the	employer	job applicant
Sr. Santos Tomás for his documents.	asks	shows
Tomás Sr. Santos his documents.	asks	shows
Sr. Santos Tomás's documents.	accepts	refuses
Tomás the job.	gets	does not get

-

## **Working in the United States**

Immigrant Employment Rights Part I

## • I-9 FORM

- 1. Look at an I-9 form.
- 2. The Immigration and Nationality Act (INA) says that employers must use the I-9 form.
- 3. Employers use the I-9 form to check every new employee's **identity** and **work** authorization.
- 4. Employees must have the right documents.
- 5. You need one document that proves *both* identity and work authorization.
- 6. Or, you need one document that proves **identity** *and* one document that proves **work authorization**.
- 7. Look at the lists of acceptable documents.
  - a. Which documents does Tomás have?
  - b. Which document proves his identity?
  - c. Which document proves his work authorization?
  - d. Does Tomás have the right documents?



OMB No. 1615-0047; Expires 08/31/12
Form I-9, Employment
<b>Eligibility Verification</b>
0 1

Read instructions carefully before completing this form. The instructions must be available during completion of this form.

**Department of Homeland Security** U.S. Citizenship and Immigration Services

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents have a future expiration date may also constitute illegal discrimination.

Section 1.	Employee Informatio	n and Verification (To b	e complet	ed and signed b	y employee	at the time employment begins.)
Print Name:	Last	First		1	Middle Initial	Maiden Name
Address (Stre	et Name and Number)			Apt. :	#	Date of Birth (month/day/year)
City		State		Zip C	lode	Social Security #
imprisonn use of fals completio	re that federal law pro nent and/or fines for f e documents in conne n of this form.	alse statements or		A citizen of the U A noncitizen nati A lawful permand An alien authoriz	United States onal of the Un ent resident (A ed to work (Al	I am (check one of the following): ited States (see instructions) lien #) lien # or Admission #) ble - month/day/year)
Employee's S	ignature		D	ate (month/day/year	ウ	
Ad	parer's/Translator's Signatur dress (Street Name and Num Employer Review and re document from List	ber, City, State, Zip Code) I Verification (To be com	npleted an listed on 1	Print Name d signed by emp he reverse of th	oloyer. Exan	Date (month/day/year) nine one document from List A OR d record the title, number, and
	date, if any, of the doct		List		AND	List C
Document #:					-	
the above-l	isted document(s) appea	r to be genuine and to rela	te to the er	nployee named,	that the emp	ed by the above-named employee, that bloyee began employment on
(month/day/ employment		date the employee began e	0		authorized t	to work in the United States. (State
	Employer or Authorized Rep			)		Title
Business or C	Organization Name and Addr	ess (Street Name and Number, C	City, State, Z	ip Code)		Date (month/day/year)
	1 0	fication (To be completed	l and sign	ed by employer.		
A. New Nam	e (if applicable)				B. Date of Re	chire (month/day/year) (if applicable)
		uthorization has expired, provid				establishes current employment authorization.
l attest, unde				is authorized to w		Expiration Date (if any):
	, the document(s) I have exa Employer or Authorized Rep	amined appear to be genuine a resentative	ind to relate	to the individual.		Date (month/day/year)
						Form I-9 (Rev. 08/07/09) Y Page

	LIS	TS OF ACCEPTABLE DOCUME All documents must be unexpired	NTS			
LIST A LIST B LIST C						
	Documents that Establish Both Identity and Employment Authorization O	Documents that Establish Identity R	AND	Documents that Establish Employment Authorization		
<ol> <li>U.S. Passport or U.S. Passport Card</li> <li>Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> </ol>		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		Social Security Account Number card other than one that specifies on the face that the issuance of the card does not authorize employment in the United States		
	Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa	<ol> <li>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,</li> </ol>		<ol> <li>Certification of Birth Abroad issued by the Department of State (Form FS-545)</li> <li>Certification of Report of Birth issued by the Department of State (Form DS-1350)</li> </ol>		
	Employment Authorization Document that contains a photograph (Form	<ul><li>eye color, and address</li><li>3. School ID card with a photograph</li></ul>	3.			
	I-766)	4. Voter's registration card	4.	Original or certified copy of birth certificate issued by a State,		
	In the case of a nonimmigrant alien authorized to work for a specific	5. U.S. Military card or draft record		county, municipal authority, or territory of the United States		
	employer incident to status, a foreign passport with Form I-94 or Form	6. Military dependent's ID card		bearing an official seal		
	I-94A bearing the same name as the passport and containing an endorsement of the alien's	7. U.S. Coast Guard Merchant Mariner Card	5. Native Americar	Native American tribal document		
	nonimmigrant status, as long as the period of endorsement has not yet	8. Native American tribal document				
	expired and the proposed employment is not in conflict with any restrictions or limitations	<b>9.</b> Driver's license issued by a Canadian government authority	6. U.S. Citizen ID Car	U.S. Citizen ID Card (Form I-197		
6.	identified on the form Passport from the Federated States of	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)		
	Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with	10. School record or report card	8.	Employment authorization document issued by the		
	Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association	11. Clinic, doctor, or hospital record		Department of Homeland Security		
	Between the United States and the FSM or RMI	12. Day-care or nursery school record				

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

Form I-9 (Rev. 08/07/09) Y Page 5



## KNOW THE LAW | Document Abuse

Document abuse is against the law. The law says an employee can choose which documents to show an employer. The I-9 form says, "Employers cannot specify which document(s) they will accept from an employee."

These are possible examples of **document abuse**.

- The employer asks for your documents **before** they offer you the job.
- The employer asks you for different documents.
- The employer asks you for more documents.
- The employer asks you for **specific** documents.

If you have questions about document abuse, you can contact:



### THE OFFICE OF SPECIAL COUNSEL FOR IMMIGRATION RELATED UNFAIR EMPLOYMENT PRACTICES (OSC)

The OSC is a part of the U.S. Department of Justice (DOJ). Call **1-800-255-7688**. The call is free.

TDD: 1-800-237-2515



### THE NEW YORK CITY COMMISSION ON HUMAN RIGHTS (CCHR)

There is an office in every borough.

Call **311**.

Or, call the Central Office at 1-212-306-7450.

The New York City Commission on Human Rights helps residents of the five boroughs of New York City.

You can get help in your language from OSC and CCHR. If you need an interpreter, say:

"I need an interpreter. I speak \_\_\_\_\_."



I-9 Form | Part I

## **REPORTING A PROBLEM**

Complete the dialogue. Practice the dialogue with a partner.

<i>Tomás:</i> I have a problem.
<i>Friend:</i> What's the matter?
<i>Tomás:</i> I have two documents, but my boss only wants to see my green card.
<i>Friend:</i> Call They can help you, for free!
<i>Tomás:</i> But my English is not very good.
<i>Friend:</i> If you want to speak your language, you can ask for an



## **NEW WORD PRACTICE**

### What's another word for...?

	illenel
against the law	illegal
documents	papers, identification
employer	boss
employee	worker
green card	permanent residence card
refuse	reject
valid	OK, acceptable

### Complete the sentences. Use the words in the box.

	documents	green card	employee	employer
	<del>job</del>	law	valid	
1.	Tomás needs a	job	·	
2.	Tomás has		_documents.	
3.	3. Sr. Santos refuses Tomás's			
4.	Sr. Santos asks Toma	ás for his		
5.	Document abuse is	against the		
6.	An		can choose which docume	ents to show employers.
7.	An		cannot refuse valid docum	ients.

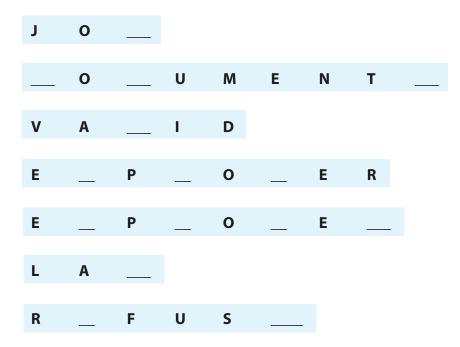


I-9 Form | Part I 💻

### Circle the same word:

job documents	jab document	jib documents	job documentation	jot documented
valid	valid	invalid	valued	value
employer employee	employ employ	employee employee	employed employed	employer employer
law	lawyer	lab	law	low
refuse	refusal	refuse	fuse	refuge

## Write the missing letter:



## **Working in the United States**

Immigrant Employment Rights Part I

## VIDEO 2 A New Job



#### 1. Watch Video 2.

- Who do you see?
- Do you see **document abuse**?



Employee



Employer

#### 2. Talk about the Video.

Circle **YES** or **NO**.

A woman has a new job.	YES	NO
This is a temporary job.	YES	NO
Her employer asks for her documents.	YES	NO
Her documents are permanent.	YES	NO
Her employer asks for different documents.	YES	NO
This is an example of document abuse.	YES	NO

Video 2 | Part I

#### 3. Listen and Practice

#### **Employer:**

What's this Temporary Proof of Permanent Residence?

#### **Employee:**

It's all I have.

#### **Employer:**

But this is a permanent job, not temporary. I need something permanent.

#### **Employee:**

Well, I'm here permanently. It's just the card that expires, like a driver's license.

#### **Employer:**

I don't know. I need your green card. Your Permanent Resident Card. Why don't you reapply when you get your permanent card? Okay?

#### 4. Complete the sentences. Use the words from the box below.

	documents	Office of Special Counsel
199	job	Permanent Resident Card
3 3	law	Temporary Proof of Permanent Residence
	I-9 Form	

#### Employee

a. This woman has a new \_\_\_\_\_\_.

b. Today, her employer is checking her \_\_\_\_\_\_.

c. At the interview, she shows the employer her \_\_\_\_\_\_.

- d. The employer asks to see her \_\_\_\_\_\_.
- e. She can call the \_\_\_\_\_\_ for help.
- f. Document abuse is against the \_\_\_\_\_\_.

g. Her employer can call the OSC to ask about her \_\_\_\_\_\_.

## Working in the United States

Immigrant Employment Rights Part I

## VOCABULARY | Finding a Job



#### DIALOGUE

*Complete the dialogue. Practice the dialogue with a partner.* 

Applicant:	Hello, I'm looking for a job.
Interviewer:	
Applicant:	
Interviewer:	
Applicant:	
Applicant.	
Interviewer:	

#### Write

- What is your name?
- Where are you from?
- Where do you live?
- Do you work? Where do you work?
- What is your job?
- What is your dream job?





## Discrimination

Immigrant Employment Rights Part II

## VIDEO 3 | A deli needs a dishwasher.



Deli Boss



Applicant

#### 1. Watch Video 3.

- Who do you see?
- What is the problem?

### 2. Talk about the Video.

Circle **YES** or **NO**.

A man needs a job.	YES	NO
The man goes to a deli.	YES	NO
The man talks to the boss.	YES	NO
The boss needs a painter.	YES	NO
The boss asks the man for his documents.	YES	NO
The man shows the boss his documents.	YES	NO
The man gets the job.	YES	NO



**3. What is the problem?** *Read the dialogue.* 







Applicant

### Deli Boss:

Are you legal? Green card?

### **Applicant:**

Sí. Yes.

### Deli Boss:

Listen, I'm sorry. I just can't hire you. You have to speak better English to work here.

## Complete the sentences.

A man wants a job as a	dishwasher	painter
He experience as a dishwasher.	has	does not have
The man his green card.	has	does not have
The man a little English.	speaks	does not speak
The deli bossa little Spanish.	speaks	does not speak
English necessary to do the job.	is	is not
The man the job.	gets	does not get

## \* KNOW THE LAW | National Origin and Citizenship Status Discrimination

- 1. A man wants a job as a dishwasher.
- 2. He has valid documents to work in the U.S.
- 3. The employer does not like his accent.
- 4. The employer says he needs better English.
- 5. English is not necessary to do the job.
- 6. But, the employer does not want to hire him.
- 7. This is an example of **national origin discrimination**.
- 8. **Discrimination** is different and unfair treatment of people.
- 9. An employer cannot treat you differently because of:
  - a. your place of birth
  - b. native language
  - c. accent
  - d. appearance
  - e. citizenship status

## VOCABULARY | Finding a Job



## **NEW WORD PRACTICE**

#### Write the correct word under the picture. Use the words below.

911 operator	air traffic con	troller	contract	nurse	waiter
		-	<b>A</b>	<b>6</b>	
*	S	A	Ø	Y	
	Let	A.	T	¥	== 45
		~			

The laws says some jobs can require English. For example:

- air traffic controller
- 911 operator

The laws says some jobs can require uniforms or dress codes. For example:

- waiter
- nurse

The laws says some jobs can require citizenship status. For example:

• when required by government contract

## **DISCRIMINATION**

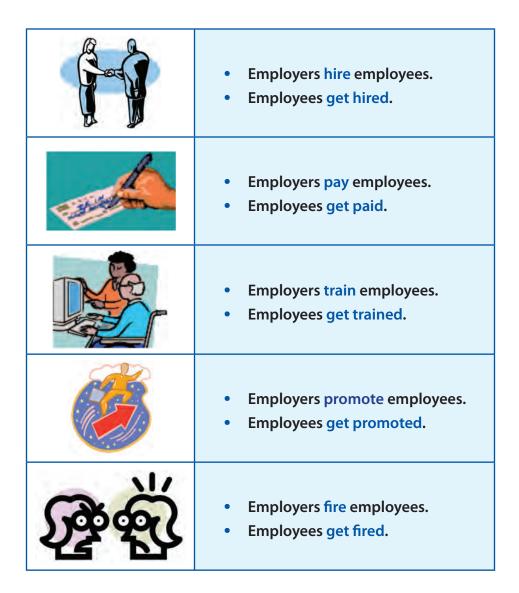
### Can you find examples of discrimination? Read the sentences and choose YES or NO.

- **YES** = that's OK
- **NO** = that's against the law

<ol> <li>An employer can write a job advertisement that says, "Women only."</li> </ol>	YES	NO
2. An employer can say, "We don't interview people from your country."	YES	NO
3. An employer can ask employees to wear a uniform.	YES	NO
<ol> <li>An employer can pay some employees more because they are not immigrants.</li> </ol>	YES	NO
5. A manager at a department store can say, "Only citizens get promotions."	YES	NO
<ol> <li>An employer can ask employees to speak only English all the time at work.</li> </ol>	YES	NO
7. An employer can fire employees who complain about discrimination.	YES	NO
8. An employee can wear a turban or scarf at work for religious reasons.	YES	NO



## VOCABULARY | On the Job



### Talk with a partner:

- Do you work?
- When did you get hired?
- How do you get paid? Do you get paid in cash or by check?
- How often do you get paid?

## FOR MORE INFORMATION | National Origin Discrimination

The Immigration and Nationality Act and the New York City Human Rights Law protect employees against discrimination based on national origin or citizenship status.

If you have questions about discrimination, you can contact:



The Office of Special Counsel for Immigration Related Unfair Employment Practices (OSC) helps employees and employers anywhere in the United States.

You can find information about discrimination online in these languages: Arabic, Cambodian, Chinese, Farsi, French, Haitian Creole, Hindi, Hmong, Korean, Laotian, Punjabi, Russian, Spanish, Tagalog, Urdu, and Vietnamese.

#### Visit: www.justice.gov/crt/osc/htm/CRTNatorigin.htm.



THE NEW YORK CITY COMMISSION ON HUMAN RIGHTS (CCHR) There is an office in every borough. Call 311.

Or, call the Central Office at 1-212-306-7450.

The New York City Commission on Human Rights helps residents of the five boroughs of New York City.

Visit: www.nyc.gov/cchr

## DISCUSS Do you have experience with discrimination?

The Office of Special Counsel (OSC) and The New York City Commission on Human Rights want to stop national origin discrimination. The Office of Special Counsel (OSC) and The New York City Commission on Human Rights teach employers and employees about how to stop discrimination.

- Do you have experience with discrimination?
- What happened?
- What did you do?
- Find a partner and create a dialogue about discrimination for the class.
- What is the problem?
- Who can help you?

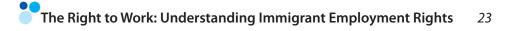
Discrimination | Part II

## **DIALOGUES**

Complete these dialogues. Find solutions to the problems. Practice the dialogues with a partner.

Employee:	I have a problem.
Friend:	What's the matter?
Employee:	My employer says I cannot speak Spanish at work. But I only speak Spanish during breaks.
Friend:	Call the They can help you, for free!
Employee:	But my English is not very good.
Friend:	You can ask for an

Husband:	How was your day?
Wife:	Not good. My manager says I can't get a promotion because I wasn't born in the U.S.
Husband:	l don't think that's legal. Let's call
Wife:	I don't want any problems.
Husband:	Don't worry. The law protects you against



Immigrant Employment Rights Part III

PROBLEM	WHO CAN HELP?	
BENEFITS	New York State Department of Labor (DOL) Call 1-800-447-3992.	
BREAKS	New York State Department of Labor (DOL) Call 1-800-447-3992.	
DISCRIMINATION	<i>Office of Special Counsel for Immigration Related Unfair Employment Practices (OSC)</i> . Call 1-800-255-7688. The call is free. TDD: 1-800-237-2515.	
	NYC Commission on Human Rights (CCHR) Call 1-212-306-7450.	
DOCUMENT ABUSE	Office of Special Counsel for Immigration Related Unfair Employment Practices (OSC). Call 1-800-255-7688. The call is free. TDD: 1-800-237-2515.	
E-VERIFY GENERAL QUESTIONS	U.S. Citizenship and Immigration Services E-Verify Worker Hotline Call 1-888-897-7781.	
E-VERIFY DISCRIMINATION	Office of Special Counsel for Immigration Related Unfair Employment Practices (OSC). Call 1-800-255-7688. The call is free. TDD: 1-800-237-2515.	
IMMIGRATION STATUS OR CITIZENSHIP QUESTIONS	<i>New York Immigration Coalition (NYIC)</i> Call 1-212-627-2227.	
	New York State Immigration Hotline Call 1-212-419-3737 or 1-800-566-7636.	
	CUNY Citizenship Now! Immigration Centers Call 1-646-344-7245.	
MINIMUM WAGE	<i>New York State Department of Labor (DOL)</i> Call 1-800-447-3992.	
OVERTIME	New York State Department of Labor (DOL) Call 1-800-447-3992.	
SAFETY PROBLEMS ON THE JOB	U.S. Office of Occupational Safety and Health Administration Call 1-800-321-OSHA.	
UNPAID WAGES	New York State Department of Labor (DOL) Call 1-800-447-3992.	



## **REPORTING A PROBLEM** Listen and Practice.

### Tomás calls the Office of Special Counsel for advice. Listen and practice.

Tomás:Hello. Is this the OSC?Operator:Yes. How can I help you?Tomás:I have a problem with an employer.Operator:What is your problem?Tomás:		
Tomás:I have a problem with an employer.Operator:What is your problem?Tomás:	Tomás:	Hello. Is this the OSC?
Operator:What is your problem?Tomás:	Operator:	Yes. How can I help you?
Tomás:	Tomás:	I have a problem with an employer.
Operator:Do you have the employer's name and address?Tomás:	Operator:	What is your problem?
Tomás:	Tomás:	·
Operator:When did this happen?Tomás:	Operator:	Do you have the employer's name and address?
Tomás:	Tomás:	·
Operator:Where did this happen?Tomás:	Operator:	When did this happen?
Tomás:	Tomás:	·
Operator:       Do you want help in your language?         Tomás:          Operator:       What is your native language?         Tomás:	Operator:	Where did this happen?
Tomás:	Tomás:	·
Operator:       What is your native language?         Tomás:	Operator:	Do you want help in your language?
Tomás:	Tomás:	·
	Operator:	What is your native language?
<i>Operator:</i> One minute, please.	Tomás:	·
	Operator:	One minute, please.

## **KEEP A RECORD**

If you have a problem on the job, you need to keep a record of the problem.

Employee Name	
Employee Contact Information	
Employer Name and Names of People Involved	
Employer Address or Location	
Date of Problem	
Time	
What happened?	

Immigrant Employment Rights Part III

## THE OFFICE OF SPECIAL COUNSEL (OSC)

#### What happens if I report a problem to the OSC?

If there is a problem, the OSC will ask you to complete a charge form.

On the **charge form** you provide:

- your name, address, and telephone
- the name, address and telephone of the employer where you had the problem
- a description of what happened, when and where

You must make a complaint within 180 days.

Find a charge form online in English, Spanish, Chinese or Vietnamese at:

### http://www.justice.gov/crt/osc/htm/charge.php

What happens next? Here are some possibilities:

- The OSC contacts the employer.
- The OSC informs the employer about the law.
- The employee gets the job or gets hired back.
- The employee gets back pay.
- The employer pays fines or damages.
- The employer attends training.

Investigations typically take no longer than 7 months.

#### Vocabulary

What is...?

CHARGE FORM	the document you complete when you have a problem with discrimination and want to report it to the OSC	
ВАСК РАҮ	money you were not paid when you worked	
<b>FINES OR DAMAGES</b> money an employer pays the government as a penalty		





Immigrant Employment Rights Part III

## WAGES



- 1. When you work, you must get paid.
- 2. Another word for the money you get paid is wages.
- 3. The law says all workers must get promised wages.
- 4. Undocumented workers must get promised wages.
- 5. If you work, an employer must pay you for your work.
- 6. If an employer doesn't pay you after you have done the work, you can call the New York State Department of Labor at 1-800-447-3992.
- 7. The New York State Department of Labor can help workers who have problems with promised wages.
- 8. If you have questions about your immigration status, you can call:
  - The New York Immigration Coalition at 1-212-627-2227.
  - The New York Immigration Hotline at **1-212-419-3737** or **1-800-566-7636**.
  - The City University of New York Citizenship Now! Immigration Centers at 1-646-344-7245.

Immigrant Employment Rights Part III

## • E-VERIFY



- 1. Some employers use a computer system to check an employee's information on the I-9 form.
- 2. This system is called E-Verify.
- 3. E-Verify checks an employee's information on the I-9 form:
  - with the Social Security Administration
  - with the Department of Homeland Security (non-citizens)
- 4. You can have problems with E-Verify if there are changes in your personal information. For example:
  - your name changes because you get married or divorced
  - your citizenship status changes
- 5. Always report changes in your personal information to the **Social Security** Administration or the **Department of Homeland Security**.

Social Security Administration	www.socialsecurity.gov 1-800-772-1213
Department of Homeland Security	www.dhs.gov/E-Verify 1-888-897-7781

## VIDEO 4 | María's employer uses E-Verify.



### 1. Watch Video 4.

- Who do you see?
- What **documents** do you see?

### 2. Talk about the Video.

Circle **YES** or **NO**.

Does María have a new job?		NO
Does her employer check her I-9 form?		NO
Does María have the right documents?		NO
Does María have a new name?		NO
Does María have a problem when her employer uses E-Verify?	YES	NO

## KNOW THE LAW | Tentative Nonconfirmation (TNC)

- 1. Problems with E-Verify are called **Tentative Nonconfirmation (TNC)**.
- 2. María's employer receives a **TNC** from E-Verify.
- 3. What can María do?
- 4. María can *not* contest the TNC and lose her job.
- 5. Or, María can **contest the TNC** and try to fix the problem.
- 6. She has 8 or fewer work days to begin to fix the problem.



If you have problems with E-Verify, you can contact:

- The Department of Homeland Security E-Verify employee hotline at 1-888-897-7781 or www.dhs.gov/E-Verify.
- The Office of Special Counsel for Immigration Related Unfair Employment Practices (OSC) at 1-800-225-7688 or *www.usdoj.gov/crt/osc* if your employer discriminates against you because of a problem with E-Verify.

## **E-Verify Questions**

Maria receives a tentative nonconfirmation (TNC) from her employer. What can she do? Read Maria's questions and choose YES or NO.

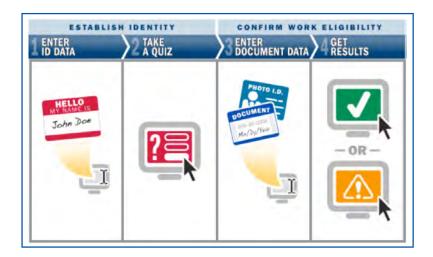


1. Will I get fired?	YES	NO
2. Will I get paid?	YES	NO
3. Can l go to training?	YES	NO
4. Will my schedule change?	YES	NO
5. Will you tell my supervisor?	YES	NO
6. Can I have time to fix the problem?	YES	NO
7. Can you tell me what to do to fix the problem?	YES	NO



## KNOW THE LAW | E-Verify Self Check

- If you want to review your personal information before a job interview, you can use E-Verify Self Check.
- 2. E-Verify Self Check is optional. No employer can require you to use E-Verify Self Check.
- 3. It is available in English and Spanish
- 4. It is only **online**, not on paper.
- 5. It is **free**. There is **no fee**.
- 6. Personal information on E-Verify Self Check is confidential.
- 7. There are four steps to use E-Verify Self Check:



To learn more about E-Verify Self-Check, go to: www.uscis.gov/EVerifySelfCheck.

If an employer requires you to use E-Verify Self Check, contact The Office of Special Counsel for Immigration Related Unfair Employment Practices (OSC) at **1-800-225-7688** or *www.usdoj.gov/crt/osc*. No one can require you to use E-Verify Self Check.

## **KNOW YOUR ACRONYMS**

Acronyms are words made from the first letters in a name. Find the correct acronym for each name. Choose from the box below:

<del>DHS</del>	DOJ	DOL	OSHA	ICE	INA
CCHR	NYIC	OSC	SSN	USCIS	SSA

NAME	ACRONYM
1. Department of Homeland Security	DHS
2. US Citizenship and Immigration Services	
3. Immigration and Customs Enforcement	
4. Department of Justice	
5. Office of Special Counsel for Immigration-Related Unfair Employment Practices	
6. Department of Labor	
7. Social Security Administration	
8. Social Security Number	
9. Immigration and Nationality Act	
10. Occupational Safety and Health Administration	
11. New York City Commission on Human Rights	
12. New York Immigration Coalition	



Immigrant Employment Rights Part IV

WHAT'S MY WEB ADDRESS?

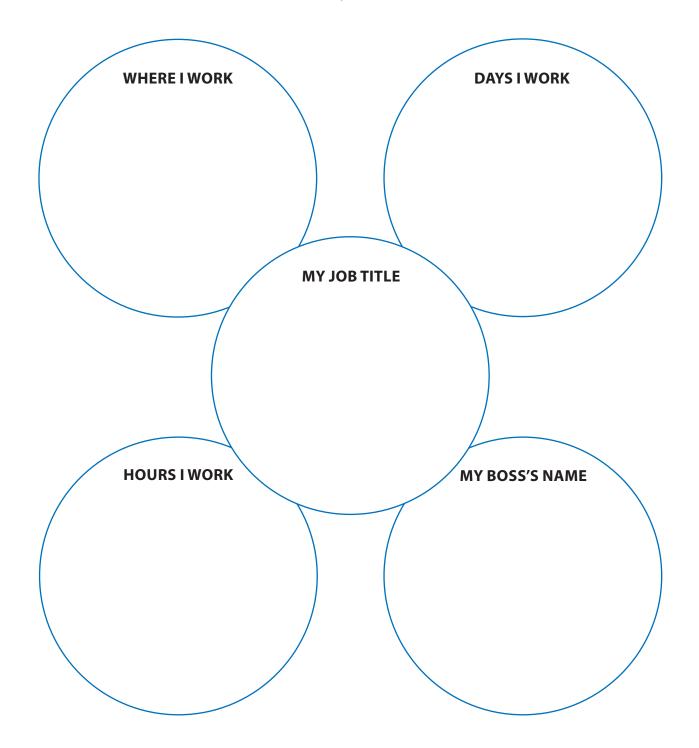


- 1. Go to www.google.com
- 2. Enter the acronym in the search box.
- 3. Write down the web address.
- 4. Check your answers with your teacher or a classmate.

	AGENCY	WEB ADDRESS
1.	DHS	<u>www.dhs.gov</u>
2.	USCIS	
3.	DOJ	
4.	DOL	
5.	OSHA	
6.	New York State DOL	
7.	CCHR	
8.	NYIC	

Immigrant Employment Rights Part IV

# WHAT'S YOUR JOB? | Tell me about yourself.



## WHAT'S YOUR JOB? Ask a classmate.

#### Here is a list of jobs in the workbook:

painter	air traffic controller	nurse
dishwasher	911 operator	manager
deli owner	waiter	interpreter

What are the jobs in your class? Ask your classmates.

Write the names and jobs below:

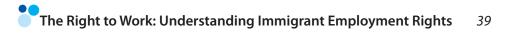
NAME	JOB

## **PRONUNCIATION PRACTICE**

Practice saying these new words. How many syllables? Where is the stress?

	1.	job								
-	2.	law								
	3.	val	•	id						
4	4.	ac	•	cent						
1	5.	lan	•	guage						
(	5.	рау	•	check						
7	7.	doc	•	u	•	ment				
8	8.	im	•	mi	•	grant				
9	9.	ар	•	pli	•	cant				
	10.	in	•	ter	•	view				
	11.	cit	•	i	•	zen				
	12.	em	•	ploy	•	er				
	13.	em	•	ploy	•	ee				
	14.	ар	•	pear	•	ance				
	15.	cit	•	i	•	zen	٠	ship		
	16.	ad	•	ver	•	tise	•	ment		
	17.	ар	•	pli	•	са	•	tion		
	18.	dis	•	crim	•	i	•	na	•	tion

# **APPENDIX**



Read instructions carefully before completing this form. The instructions must be available during completion of this form.         ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANN bifure expiration date may also constitute illegal discrimination.         Section 1: Employee Information and Verification (To be completed and signed by employee at the time employment begins.)         Print Name: Last       First         Address (Street Name and Number)       Apt. #         City       State         Zip Code       Social Security #         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 alwafu permanent resident (Alice #)	Department of Homeland Security U.S. Citizenship and Immigration Services		OMB No. 1615-0047; Expires 08/3 Form I-9, Employm Eligibility Verificat
specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents ha future expiration date may also constitute lingual discrimination. Section 1. Employee Information and Verification ( <i>To be completed and signed by employee at the time employment begins.)</i> Print Name: Last First Middle Initial Maiden Name Address (Street Name and Number) Apt. # Date of Birth (month/day/year) City State Zip Code Social Security # La maware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completed and signed by employee. It is a monitored to the following: A criterio of the United States (see instructions) A lawful permanent resident (Alien #)	Read instructions carefully before completing this form. The	instructions must be available during	g completion of this form.
Print Name:       Last       First       Middle Initial       Maiden Name         Address (Street Name and Number)       Apt. #       Date of Birth (month/day/year)         City       State       Zip Code       Social Security #         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 an (check one of the following):         A citizen of the United States (see instructions)       A number of the United States (see instructions)         Employee's Signature       Date (month/day/year)         Employee's Signature       Date (month/day/year)         Preparet and/Or Translator Certification (To be completed and signed if Section 1 is prepared by person other than the omployee.) I attest, under penalto of perijury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.         Preparet stranslator's Signature       Print Name         Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one doccument from List A O examine	specify which document(s) they will accept from an emp	ployee. The refusal to hire an ind	ed individuals. Employers CANNO ividual because the documents ha
Print Name:       Last       First       Middle Initial       Maiden Name         Address (Street Name and Number)       Apt. #       Date of Birth (month/day/year)         City       State       Zip Code       Social Security #         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 an (check one of the following):         A citizen of the United States (see instructions)       A number of the United States (see instructions)         Employee's Signature       Date (month/day/year)         Employee's Signature       Date (month/day/year)         Preparet and/Or Translator Certification (To be completed and signed if Section 1 is prepared by person other than the omployee.) I attest, under penalto of perijury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.         Preparet stranslator's Signature       Print Name         Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one doccument from List A O examine	Section 1. Employee Information and Verification (To b)	e completed and signed by employe	ee at the time employment begins.)
City       State       Zip Code       Social Security #         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):         A citizen of the United States       A citizen of the United States (see instructions)         A lawful permanent resident (Alten #)       unit (cepiration date, if applicable, month-dar/vear)         Employee's Signature       Date (month-dar/vear)         Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee, 1 attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.         Preparer and/or Translator Signature       Print Name         Address (Street Name and Number, City, State, Zip Code)       Date (month-day/year)         Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A O examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiritation date (f any):         Document ft:	· · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
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.	Address (Street Name and Number)	Apt. #	Date of Birth (month/day/year)
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. <ul> <li>A citizen national of the United States</li> <li>A noncitizen national of the United States (see instructions)</li> <li>A lawful permanent resident (Alien #)</li> <li>Date (month/day/year)</li> </ul> Employee's Signature         Date (month/day/year)           Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) 1 attest, under penalty of perjury, that I have assisted in the completon of this form and that to the best of my knowledge the information is true and correct.           Preparer's Translator's Signature         Print Name           Address (Street Name and Number, City, State, Zip Code)         Date (month/day/year)           Section 2. Employer Review and Verification (To be completed and signed by employer, Examine one document from List A O examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date (f any):           Document #:         Espiration Date (f (any):           Expiration Date (f (any):         Date employee named, that the employee began employment on (month/day/year)           Signature of Employer Authorized Representative         Print Name           Expiration Date (f (any):         Date employee is authorized to work in the United States. (State employment agericis may of more the onegenuine and to relate to the employee is authorized to	City State	Zip Code	Social Security #
imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form. <ul> <li>A citizen of the United States (see instructions)</li> <li>A lawful permanent resident (Alien #)</li> <li>multication date, if applicable - monh/daty/sear)</li> </ul> Employee's Signature         Date (monh/daty/sear)           Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee, 1 attest, under penalty of perjary, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.           Preparer and/or Translator Signature         Print Name           Address (Street Name and Number, City, State, Zip Code)         Date (month/daty/year)           Section 2. Employer Review and Verification (To be completed and signed by employer, Examine one document from List A or examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).           Document #:	I am aware that federal law provides for	I attest, under penalty of perjury, t	hat I am (check one of the following):
use of tasks documents in connections with the completion of this form.	•	A citizen of the United States	ŝ
An alien authorized to work (Alien # or Admission #)         Employee's Signature         Date (month/day/year)         Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) 1 attest, under penalty of peryiny. that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.         Preparer and/or Translator Signature       Print Name         Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A O examine one document from List A or examine one document from List A or List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)         List A       OR       List B       AND       List C         Document #:	use of false documents in connection with the	A noncitizen national of the U	United States (see instructions)
Employee's Signature       Date (month/day/year)         Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of periyury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.         Preparer's/Translator's Signature       Print Name         Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A O examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)         List A       OR       List B       AND       List C         Document #:	completion of this form.	A lawful permanent resident	(Alien #)
Employee's Signature       Date (month/day/year)         Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.         Preparer's/Translator's Signature       Print Name         Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A O examine one document from List A Constraint on the form and the to the best of my knowledge the information serverse of this form, and record the title, number, and expiration date, if any, of the document(s).         Document #:			
Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.         Preparer's/Translator's Signature       Print Name         Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A O examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).         List A       OR       List B       AND       List C         Document #:	Employee's Signature	· · · · · · · · · · · · · · · · · · ·	icable - month/day/year)
penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.         Preparet's/Translator's Signature       Print Name         Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A O examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)         List A       OR       List B       AND       List C         Document title:	Preparer and/or Translator Certification (To be completed of		son other than the employee.) I attest, under
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examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)         List A       OR       List B       AND       List C         Document title:			
List A       OR       List B       AND       List C         Document title:	examine one document from List B and one from List C, as	pleted and signed by employer. Ex listed on the reverse of this form, a	amine one document from List A O. and record the title, number, and
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Issuing authority:			
Document #:			
Expiration Date (if any):	Issuing authority:		
Document #:	Document #:		
Expiration Date (if any):	Expiration Date (if any):		
CERTIFICATION: I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year)	De sum est #		
the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year)	Document #:		
Signature of Employer or Authorized Representative       Print Name       Title         Business or Organization Name and Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 3. Updating and Reverification (To be completed and signed by employer.)       A. New Name (if applicable)       B. Date of Rehire (month/day/year) (if applicable)         C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment establishes current employment establishes current employment establishes current employment establishes current establishes c			
Business or Organization Name and Address (Street Name and Number, City, State, Zip Code)       Date (month/day/year)         Section 3. Updating and Reverification (To be completed and signed by employer.)       B. Date of Rehire (month/day/year) (if applicable)         A. New Name (if applicable)       B. Date of Rehire (month/day/year) (if applicable)         C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment establishes current employment establishes current employment establishes current employment establishes esta	Expiration Date ( <i>if any</i> ): CERTIFICATION: I attest, under penalty of perjury, that I h the above-listed document(s) appear to be genuine and to relat	te to the employee named, that the er	mployee began employment on
Section 3. Updating and Reverification (To be completed and signed by employer.)         A. New Name (if applicable)         B. Date of Rehire (month/day/year) (if applicable)         C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment authorization below for the document that establishes current employment establishes current employment establishes current establishes curren	Expiration Date (if any):         CERTIFICATION: I attest, under penalty of perjury, that I h         the above-listed document(s) appear to be genuine and to relate         (month/day/year)       and that to the best of my be         employment agencies may omit the date the employee began e	te to the employee named, that the er knowledge the employee is authorized	mployee began employment on
A. New Name (if applicable) B. Date of Rehire (month/day/year) (if applicable) C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment authoriza Document Title: Document #: Expiration Date (if any): 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 present	Expiration Date (if any):         CERTIFICATION: I attest, under penalty of perjury, that I h         the above-listed document(s) appear to be genuine and to relate         (month/day/year)       and that to the best of my be         employment agencies may omit the date the employee began e	te to the employee named, that the en knowledge the employee is authorized imployment.)	mployee began employment on d to work in the United States. (Stat
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l 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 present	Expiration Date (if any): CERTIFICATION: I attest, under penalty of perjury, that I has the above-listed document(s) appear to be genuine and to relate (month/day/year) and that to the best of my be employment agencies may omit the date the employee began end signature of Employer or Authorized Representative Print Name Business or Organization Name and Address (Street Name and Number, Construction Section 3. Updating and Reverification (To be completed)	te to the employee named, that the er knowledge the employee is authorized mployment.) ne City, State, Zip Code) I and signed by employer.)	mployee began employment on d to work in the United States. (State) Title Date (month/day/year)
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Signature of Employer or Authorized Representative Date (month/day/year)	Expiration Date (if any):         CERTIFICATION: I attest, under penalty of perjury, that I h         the above-listed document(s) appear to be genuine and to relat         (month/day/year)       and that to the best of my h         employment agencies may omit the date the employee began e         Signature of Employer or Authorized Representative       Print Nan         Business or Organization Name and Address (Street Name and Number, C         Section 3. Updating and Reverification (To be completed         A. New Name (if applicable)         C. If employee's previous grant of work authorization has expired, provide         Document Title:         I attest, under penalty of perjury, that to the best of my knowledge, th	te to the employee named, that the er knowledge the employee is authorized mployment.) ne <i>City, State, Zip Code</i> ) <i>I and signed by employer.</i> ) B. Date of e the information below for the document th Document #: is employee is authorized to work in the	mployee began employment on d to work in the United States. (Stat         Title         Date (month/day/year)         Rehire (month/day/year) (if applicable)         nat establishes current employment authorization Date (if any):

Form I-9 (Rev. 08/07/09) Y Page 4

		All documents must be unexpired	
	LIST A	LIST B	LIST C
	Documents that Establish Both Identity and Employment Authorization (	Documents that Establish Identity DR A	Documents that Establish Employment Authorization ND
	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form	<ol> <li>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</li> </ol>	1. Social Security Account Number card other than one that specifies on the face that the issuance of the card does not authorize employment in the United States
3.	I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-	<ul> <li>ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as</li> </ul>	<ol> <li>Certification of Birth Abroad issued by the Department of State (Form FS-545)</li> </ol>
	readable immigrant visa	name, date of birth, gender, height, eye color, and address	3. Certification of Report of Birth issued by the Department of State
4.	Employment Authorization Document that contains a photograph (Form	3. School ID card with a photograph	(Form DS-1350)
	I-766)	4. Voter's registration card	4. Original or certified copy of birth certificate issued by a State,
5.	In the case of a nonimmigrant alien authorized to work for a specific	5. U.S. Military card or draft record	county, municipal authority, or territory of the United States
	employer incident to status, a foreign passport with Form I-94 or Form	6. Military dependent's ID card	bearing an official seal
	I-94A bearing the same name as the passport and containing an endorsement of the alien's	7. U.S. Coast Guard Merchant Mariner Card	5. Native American tribal document
	nonimmigrant status, as long as the period of endorsement has not yet	8. Native American tribal document	
	expired and the proposed employment is not in conflict with any restrictions or limitations	<b>9.</b> Driver's license issued by a Canadian government authority	6. U.S. Citizen ID Card (Form I-197)
6.	identified on the form Passport from the Federated States of	For persons under age 18 who are unable to present a document listed above:	<ol> <li>Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> </ol>
	Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with	Marshall Islands (RMI) with         m I-94 or Form I-94A indicating         immigrant admission under the         11. Clinic, doctor, or hospital record	8. Employment authorization document issued by the
	Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association		Department of Homeland Security
	Between the United States and the FSM or RMI	12. Day-care or nursery school record	

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

### LISTS OF ACCEPTABLE DOCUMENTS

#### Form I-9 (Rev. 08/07/09) Y Page 5

# **I-9 Form Summary**

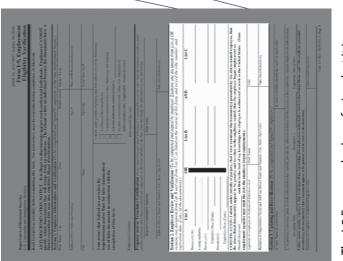
Appendix

	Read instructions carefully before completing this form. The instructions must be available during completion of this form	his form.
	ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents have future expiration date may also constitute illegal discrimination.	Employers CANNOT the documents have a
	The anti-discrimination law is printed on the top of every I-9 form. It states that it is illegal for your employer to discriminate against you if you have work authorization. Your	it it is illegal Your
and the state of t	/ employer cannot tell you which documents to show them or ask you for more or different documents than the form requires.	or different
here. The instructions must begat to discriminate again um an employee. The refi- gal discrimination.	Section 1. Employee Information and Verification (To be convolved and sized by employee at the time employment benits.	ployment hearins.)
see Lei	Print Name: Last First Mudde Initial Mudde Name	
(c)     (	Address (Street Name and Nambor) Address (Street Name and Nambor)	outh (disc)ear)
employed (b) instant and the second s	Cliny Bante Zig Code Social Security #	10
Present the second	I amest, under penality of perjury, that I am (check one of the following) A criteren of the United States	of the following):
and a finding state of the stat	Impresonment shower intest for fastes statements or use of false documents in connection with the commentation of this form?	structions)
11		a f) (m)
Income the second s	Employee's Signature 6 Date (noundiday/sear)	
a. An experimental production to predict on the constraint of t	Preparer and/or Translator Certification (fo be completed and signed if Section 1 is prepared by a person other than the employee) I attext, under penalty of perjury, that I have assisted in the completion of this form and that to the heat of my knowledge the information is true and correct.	phoyeee.) I attext, under ext.
where a second sec	Preparer's Translator's Signature	
7. Under the second	Address (Street Name and Number, City, State, Zip Code) Date (monthiday)rear	car)
The I-9 Form can look confusing, but it is	In this section, you must fill out your information. You can ask someone to help you translate or complete this section.	b you
actually very simple. These three sections are important to understand.		
	2 Employee enters current address and date of birth.	
	3 Employee enters his or her city, state, ZIP Code, and Social Security number. Entering the Social	Social

Security number is optional unless the employer verifies employment authorization through the USCIS E-Verify Program.

- Employee reads warning and attests to his or her citizenship or immigration status. (4)
- Employee signs and dates the form. 6
- If the employee uses a preparer or translator to fill out the form, that person must certify that he or she assisted the employee by completing this signature block. 0

# Form 1–9 Employment Eligibility Verification



The I-9 Form can look confusing, but it is actually very simple. These three sections are important to understand.

Image: The start of the sta		
Document title:       Issuing authority:       Document #:       Expiration Date (if any):       Document #:       Expiration Date (if any):	List B AND	List C
Issuing authority: Document #: Expiration Date ( <i>if any</i> ): Document #: Document #: Expiration Date ( <i>if any</i> ): Expiration Date ( <i>if any</i> ): CERTIFICATION: 1 attest, under penalty of perjury, that 1 have e the above-listed document(s) appear to be genuine and to relate to 1		
Document #:         Expiration Date (g/amy):         Document #:         Document #:         Expiration Date (g/amy):         Expiration Date (g/amy):         Expiration Date (g/amy):         Expiration Date (g/amy):		
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Expiration Date ( <i>ff any):</i> <b>CERTIFICATION: 1 attest, under penalty of perjury, that 1 have e</b> the above-listed document(s) appear to be genuine and to relate to 1		
CERTIFICATION: I attest, under penalty of perjury, that I have e the above-listed document(s) appear to be genuine and to relate to t		
	I have examined the document(s) presered at the end of the	ited by the above-named employee, that ployee began employment on
(month/day/year) (2) and that to the best of my knowledge the employment agencies may omit the date the employee began employment.)	and that to the best of my knowledge the employee is authorized to work in the United States. (State date the employee began employment.)	to work in the United States. (State
Signature of Employer or Authorized Representative Print Name	Name	Title

Your employer will fill out this section. This is where you must show your employer your documents to prove your identity and work authorization. You only need to show your employer one document from List A, OR, one document from List B and one from List C. The lists of documents are listed on the back of the I-9 Form.

Date (month/day/year)

Business or Organization Name and Address (Street Name and Number, City, State, Zip Code)

1 Employer records document title(s), issuing authority, document number, and the expiration date from original documents supplied by employee. See Part Eight for the Lists of Acceptable Documents.

**NOTE**: You may use abbreviations for commonly used documents, e.g., DL for driver's license and SS for Social Security.

- Employer enters date employment began.
- (3) Employer attests to examining the documents provided by filling out the signature block.

#### Documents that Establish Both Identity and Employment Eligibility

# The following illustrations in this Handbook do not necessarily reflect the actual size of the documents.

The U.S. Department of State issues the U.S. passport to U.S. citizens and noncitizen nationals. There are a small number of versions still in circulation that may differ from the main versions shown here.



List A | Appendix

#### **US Passport Card**

The U.S. Department of State began producing the passport card in July 2008. The passport card is a walletsize card that can only be used for land and sea travel between the United States and Canada, Mexico, the Caribbean, and Bermuda.



Passport Card front and back

#### Permanent Resident Card (Form I-551)

On May 11, 2010, USCIS began issuing the newly redesigned Permanent Resident Card, also known as the Green Card, which is now green in keeping with its longstanding nickname. The card is personalized with the bearer's photo, name, USCIS number, alien registration number, date of birth, and laser-engraved fingerprint, as well as the card expiration date.

Note that on the new card, shown below, the lawful permanent resident's alien registration number, commonly known as the A number, is found under the USCIS # heading. The A number is also located on the back of the card.



Current Permanent Resident Card (Form I-551) front and back

This most recent older version of the Permanent Resident Card shows the DHS seal and contains a detailed hologram on the front of the card. Each card is personalized with an etching showing the bearer's photo, name, fingerprint, date of birth, alien registration number, card expiration date, and card number.

Also in circulation are older Resident Alien cards, issued by the U.S. Department of Justice, Immigration and Naturalization Service, which do not have expiration dates and are valid indefinitely. These cards are peach in color and contain the bearer's fingerprint and photograph.



Older version Permanent Resident Card (Form I-551) front and back



Unexpired Foreign Passport with I-551 Stamp

PROCESSED FOR 1-551.	
TEMPORARY EVIDENCE OF	
LAWFUL ADMISSION FOR	
PERMANENT RESIDENCE	
VALID UNTIL	I-551
EMPLOYMENT AUTHORIZED	Stamp

#### **Unexpired Foreign Passport with I-551 Stamp or MRIV**

USCIS uses either an I-551 stamp or a temporary I-551 printed notation on a machine-readable immigrant visa (MRIV) to denote temporary evidence of lawful permanent residence. Sometimes, if no foreign passport is available, USCIS will place the I-551 stamp on a Form I-94 and affix a photograph of the bearer to the form. This document is considered a receipt.

Reverify the employee in Section 3 of Form I-9 when the stamp in the passport expires, or one year after the issuance date if the stamp does not include an expiration date. For temporary I-551 receipts, at the end of the receipt validity period, the individual must present the Permanent Resident Card (Form I-551) for Section 2 of Form I-9.

The MRIV demonstrates permanent resident status for one year from the date of admission found in the foreign passport that contains the MRIV.



#### List A | Appendix



#### **Employment Authorization Document (I-766)**

USCIS issues the Employment Authorization Document to aliens granted temporary employment authorization in the United States. The card contains the bearer's photograph, fingerprint, card number, Alien number, birth date, and signature, along with a holographic film and the DHS seal. The expiration date is located at the bottom of the card.



Employment Authorization Document (Form I-766) front and back

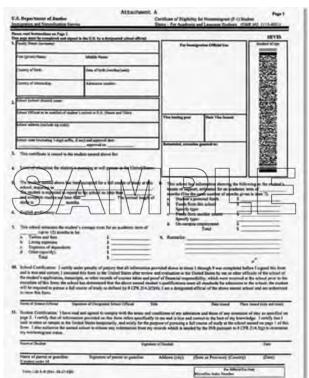


Previous back of EAD card

# Form I-20 Accompanied by Form I-94 or Form I-94A

Form I-94 or Form I-94A for F-1 nonimmigrant students must be accompanied by a Form I-20, Certificate of Eligibility for Nonimmigrant Students, endorsed with employment authorization by the designated school official for off-campus employment or curricular practical training. USCIS will issue an Employment Authorization Document (Form I-766) to all students (F-1 and M-1) authorized for a post-completion OPT period.





#### Form DS-2019 Accompanied by Form I-94 or Form I-94A

Nonimmigrant exchange visitors (J-1) must have a Form I-94 or Form I-94A accompanied by an unexpired Form DS-2019, Certificate of Eligibility for Exchange Visitor (J-1) Status, issued by the U.S. Department of State, that specifies the sponsor. J-1 exchange visitors working outside the program indicated on the Form DS-2019 also need a letter from their responsible officer.

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Form DS-2019 Accompanied by Form I-94 or Form I-94A

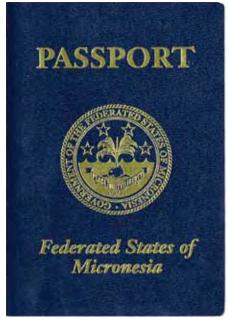
#### List A | Appendix

#### Form I-94 or Form I-94A Arrival/Departure Record

CBP and sometimes USCIS issue arrival-departure records to nonimmigrants. This document indicates the bearer's immigration status, the date that the status was granted, and when the status expires. The immigration status notation within the stamp on the card varies according to the status granted, e.g., L-1, F-1, J-1. The Form I-94 has a handwritten date and status, and the Form I-94A has a computer-generated date and status. Both may be presented with documents that Form I-9 specifies are valid only when Form I-94 or Form I-94A also is presented, such as the foreign passport, Form DS-2019, or Form I-20.

Form I-9 provides space for you to record the document number and expiration date for both the passport and Form I-94 or Form I-94A.





Passport from the Federated States of Micronesia.

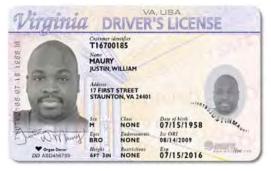
# Passports of the Federated States of Micronesia and the Republic of the Marshall Islands

In 2003, Compacts of Free Association (CFA) between the United States and the Federated States of Micronesia (FSM) and Republic of the Marshall Islands (RMI) were amended to allow citizens of these countries to work in the United States without obtaining an Employment Authorization Document (Form I-766).

For Form I-9 purposes, citizens of these countries may present FSM or RMI passports accompanied by a Form I-94 or Form I-94A indicating nonimmigrant admission under the CFA, which are acceptable documents under List A. The exact notation on Form I-94 or Form I-94A may vary and is subject to change. As of early 2009, the notation on Form I-94 or Form I-94A typically states "CFA/FSM" for an FSM citizen and "CFA/MIS" for an RMI citizen.

#### **Documents that Establish Identity Only**

The following illustrations in this Handbook do not necessarily reflect the actual size of the documents.

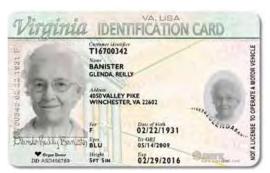


Driver's License from the Commonwealth of Virginia front

#### State-issued Driver's License

A driver's license can be issued by any state or territory of the United States (including the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands) or by a Canadian government authority, and is acceptable if it contains a photograph or other identifying information such as name, date of birth, gender, height,eye color, and address.

Some states may place notations on their drivers' licenses that state the card does not confirm employment authorization. For Form I-9 purposes, these drivers' licenses, along with every other state's, establish the identity of an employee. When presenting any driver's license, the employee must also present a List C document that establishes employment authorization.



Identification Card from the Commonwealth of Virginia front

#### Sample State Identification Card

An ID card can be issued by any state (including the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands) or by a local government, and is acceptable if it contains a photograph or other identifying information such as name, date of birth, gender, height, eye color, and address.

Some states may place notations on their ID cards that state the card does not confirm employment authorization. For Form I-9 purposes, these cards, along with every other state's, establish the identity of an employee. When presenting any state-issued ID card, the employee must also present a List C document that establishes employment authorization.

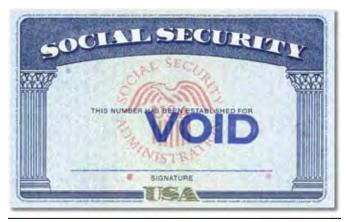


#### **Documents That Establish Employment Eligibility Only**

The following illustrations in this Handbook do not necessarily reflect the actual size of the documents.

#### U.S. Social Security Account Number Card

The U.S. Social Security account number card is issued by the Social Security Administration (older versions were issued by the U.S. Department of Health and Human Services), and can be presented as a List C document unless the card specifies that it does not authorize employment in the United States. Metal or plastic reproductions are not acceptable.



U.S. Social Security Card

#### Certifications of Birth Issued by the U.S. Department of State

These documents may vary in color and paper used. All will include a raised seal of the office that issued the document, and may contain a watermark and raised printing.

	DEPARTMENT OF STATE POREIGN SERVICE OF THE UNITED STATES OF AMERICA Certification of Birth Abroad
0	of a Giliam of the linited States of America
This i	to sertify that according to records on file in this Office
	JOANTAAN ATELAEDESE MORE
Sez MA	E
AUX	SUST 13, 1990 Report of birth recorded on SEPTEMBER 14, 1990
In Witness P	Whereas, I have hereants underrived my sume and affired the septerf the Consular Service of the United States
of America a	NANA, JAPAN
this	14TH dep of SEPTEMBER 19 90
	(SEAL)
AT A DINENCI-	GONSUS of the United States of America.

Certification of Birth Abroad Issued by the U.S. Department of State (FS-545)

Cert	159- DEPARTMENT OF STATE ification of Report of Birth of a United States Citizen	1018159
This is to certify that the birth o	OF THA SAMPLE NONCOLIA	SCX FERALE
OR APRIL 1, 1996 Was	registered with the Consular Service of the United med at BISHNEK, KYRGYZSTAN	States and a
Father DADDY SAMPLE	PARENTS Moder	
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	Administration Officers 4	adaptes DC

Certification of Report of Birth Issued by the U.S. Department of State (DS-1350)

#### **Birth Certificate**

Only an original or certified copy of a birth certificate issued by a state, county, municipal authority, or outlying possession of the United States that bears an official seal is acceptable. Versions will vary by state and year of birth. Beginning October 31, 2010, only Puerto Rico birth certificates issued on or after July 1, 2010 are valid. Please check www.uscis.gov for guidance on the validity of Puerto Rico birth certificates for Form I-9 purposes.

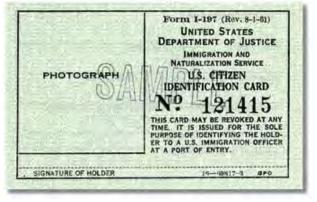
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Malo	Feb. 3, 2002	Locuro	TODA VIL NORMA
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John R. Doe			Angel I
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**Birth Certificate** 

#### List C | Appendix

#### U.S. Citizen Identification Card (Form I-197)

Form I-197 was issued by the former Immigration and Naturalization Service (INS) to naturalized U.S. citizens. Although this card is no longer issued, it is valid indefinitely.



U.S. Citizen Identification Card (Form I-197)

#### Identification Card for Use of Resident Citizen in the United States (Form I-179)

Form I-179 was issued by INS to U.S. citizens who are residents of the United States. Although this card is no longer issued, it is valid indefinitely.

> Identification Card for Use of Resident Citizen in the United States (Form I-179)

