

Office of Student Employment
Horvitz Administration Building, 1st Floor
3301 College Avenue, Davie FL 33314
8:30 a.m.- 5:00 p.m., Mon-Fri

STUDENT EMPLOYMENT APPLICATION

ALL FIRST-TIME STUDENT EMPLOYEES MUST COMPLETE ALL FORMS IN THIS PACKET, EVEN IF YOU HAVE ALREADY BEEN HIRED/PLACED.

STUDENTS WHO HAVE ACCEPTED OR BEEN OFFERED A POSITION

STUDENTS ARE REQUIRED TO PRESENT **ORIGINAL DOCUMENTS** FOR PURPOSES OF FORM I-9 (EMPLOYMENT ELIGIBILITY VERIFICATION FORM). PLEASE SEE LIST OF DOCUMENTS ON THE BACK OF FORM I-9 TO BE PRESENTED. STUDENTS MAY BRING ONE FROM **LIST A** ONLY **OR** ONE FROM **LIST B** AS WELL AS ONE FROM **LIST C**. **APPLICATIONS WILL NOT BE ACCEPTED IF ORIGINAL DOCUMENTS AS LISTED ON FORM I-9 ARE NOT PRESENTED. PLEASE BE AWARE THAT NSU PARTICIPATES IN THE E-VERIFY FEDERAL GOVERNMENT PROCESS.**

IF YOU WISH TO USE THE SOCIAL SECURITY (SS) CARD AS THE DOCUMENT FROM LIST C (FORM I-9), AND DO NOT HAVE THE ORIGINAL CARD AVAILABLE, YOU MAY APPLY FOR A DUPLICATE SS CARD WITH THE SOCIAL SECURITY ADMINISTRATION. **YOU MUST REQUEST A RECEIPT OF APPLICATION** AND PRESENT THE **RECEIPT** TO STUDENT EMPLOYMENT.

STUDENTS WHO HAVE **NOT** BEEN HIRED AND ARE SEEKING A POSITION

- ALL FIRST-TIME STUDENT EMPLOYEE APPLICANTS ARE REQUIRED TO SIGN UP FOR THE ONLINE STUDENT EMPLOYMENT WORKSHOPS. STUDENTS CAN OBTAIN INFORMATION REGARDING THE WORKSHOP AT <http://www.nova.edu/financialaid/employment/index.html> .
- STUDENTS MAY APPLY FOR JOBS BY SUBMITTING COMPLETED APPLICATION. NOTE: DO **NOT** COMPLETE FORM I-9 AT THIS POINT.
- STUDENTS WILL RECEIVE THE CONTACT INFORMATION FOR THE JOBS WITHIN 3-5 BUSINESS DAYS VIA NSU EMAIL.
- AFTER RECEIVING A JOB OFFER, RETURN TO STUDENT EMPLOYMENT TO COMPLETE THE FORM I-9 AND PRESENT ORIGINAL ID DOCUMENTS. STUDENTS MAY NOT BEGIN WORKING UNTIL THE FORM I-9 HAS BEEN COMPLETED.
- SUPERVISORS WILL BE NOTIFIED WITHIN 4-7 BUSINESS DAYS VIA EMAIL AFTER COMPLETION OF I-9 THAT PAPERWORK IS COMPLETE.

INTERNATIONAL STUDENTS ARE ELIGIBLE FOR ON-CAMPUS EMPLOYMENT IF THEY HAVE A VALID FORM I-20 AND FORM I-94.

1. INTERNATIONAL STUDENTS WHO WISH TO WORK ON-CAMPUS, AND WHO HAVE NEVER APPLIED FOR A SOCIAL SECURITY CARD WILL BE GIVEN REFERRALS TO POSITIONS
2. STUDENT MUST FIRST OBTAIN A POSITION BEFORE HE/SHE CAN APPLY FOR A SOCIAL SECURITY (SS) CARD WITH THE SOCIAL SECURITY ADMINISTRATION (SSA)
3. WHEN THE STUDENT HAS BEEN HIRED, THE SUPERVISOR MUST SUBMIT THE HIRE PAPERWORK TO STUDENT EMPLOYMENT
4. UPON BEING HIRED, THE STUDENT MUST RETURN TO STUDENT EMPLOYMENT TO COMPLETE FORM I-9 AND PRESENT ORIGINAL IDS
5. STUDENT WILL THEN REQUEST A LETTER FROM STUDENT EMPLOYMENT VERIFYING THAT THE STUDENT HAS BEEN HIRED. STUDENT WILL BE NOTIFIED VIA EMAIL WHEN THE LETTER IS READY.
6. STUDENT THEN FILES AN APPLICATION FOR THE SS CARD WITH THE SSA AND REQUESTS A RECEIPT OF APPLICATION (SSA DOES NOT ALWAYS ISSUE RECEIPTS IMMEDIATELY)
7. STUDENT PRESENTS THE **RECEIPT OF APPLICATION** AND MUST HAVE THE **SOCIAL SECURITY NUMBER**. IF SSA WILL NOT PROVIDE THE NUMBER TO THE STUDENT, THE STUDENT WILL WAIT UNTIL THE SS CARD HAS BEEN RECEIVED
8. THE STUDENT WILL UPDATE THE EMPLOYMENT APPLICATION, INCLUDING FORM W-4, I-9, ETC., WITH THE SOCIAL SECURITY NUMBER
9. THE SUPERVISOR WILL BE NOTIFIED WITHIN 4-7 BUSINESS DAYS WHEN THE STUDENT CAN BEGIN WORKING
- 10. INTERNATIONAL STUDENTS WILL NOT BEGIN WORKING UNTIL THEY BRING IN THE SOCIAL SECURITY CARD OR RECEIPT WITH SOC SEC NO.**

NOVA SOUTHEASTERN UNIVERSITY
STUDENT EMPLOYMENT APPLICATION

SECTION I. PERSONAL INFORMATION

Name: _____ Phone: _____

Date of Birth: _____ NSU ID: N _____

Local Address: _____

City, State, Zip: _____

NSU E-mail Address: _____

In case of emergency notify: _____ Phone: _____

Citizenship/Immigration status in the U.S. (check one):

U.S. Citizen (Go to SECTION II)

Alien granted Permanent Residency status by USCIS (formerly INS) (Go to SECTION II)

International/foreign student: F1 Other _____ (visa type)

If you are an international/foreign student, you are required to sign the following Foreign Student Employment Certification:

FOREIGN STUDENT EMPLOYMENT CERTIFICATION

I understand that if employed, I may work an absolute maximum of twenty hours per week during periods of enrollment and up to thirty-seven and one-half hours during scheduled breaks. I understand that if I do not have a social security number that I must apply for one with the Social Security Administration as soon as I have obtained a position. Additionally, I understand that I may not displace an American citizen through my employment.

Student Signature

SECTION II. ACADEMIC INFORMATION

Indicate your current academic status:

Undergraduate

- Freshman (0-30 credits earned)
 Sophomore (31-60)
 Junior (61-90)
 Senior (91-120)

Graduate (check all that apply)

- Master's or Higher
 HPD
 Law
 Non-Degree Seeking

Major: _____ Expected Graduation Date: _____

Indicate the number of academic credits that you expect to register for:

Summer 2011 credits Fall 2011 credits Winter 2012 credits Spring 2012 credits Summer 2012
(classes begin Jan) (classes begin Apr)

I attend classes (**check all that apply**): During the Day During the Evening On the Weekends

SECTION III. EMPLOYMENT INFORMATION

Work experience/interest: _____

Office machines and technical apparatus you can operate: _____

Have you ever been employed by Nova Southeastern University? Yes No

If Yes:

Location _____ Dates: _____

Location _____ Dates: _____

Indicate the number of hours per week you would like to work:

Less than 10 10-15 15-20 more than 20 (during vacation periods only)

Have you already been hired/offered a position?

YES _____

Department/Location of Hire/Supervisor

NO List **THREE** preferred job numbers _____

See Job Board/Listing

Date you can begin work: _____ Do you own a car? Yes No

Are you interested in summer employment? Yes No

Have you received a Federal Work-Study Award from the Office of Student Financial Aid? Yes No

SECTION IV. EMPLOYMENT EXPERIENCE

Employer: _____

Address: _____

Dates Employed: From ____/____/____ To ____/____/____ Salary/Hourly Rate: Start _____ Final _____

Telephone #: _____ Supervisor: _____

Job Title: _____ Reason For Leaving: _____

Employer: _____

Address: _____

Dates Employed: From ____/____/____ To ____/____/____ Salary/Hourly Rate: Start _____ Final _____

Telephone #: _____ Supervisor: _____

Job Title: _____ Reason For Leaving: _____

SECTION V. REFERENCES

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

SECTION VI. STUDENT SIGNATURE

I certify that the information provided in this application is true and correct to the best of my knowledge.

Student Signature

Date

STATEMENT OF STUDENT RESPONSIBILITY

Student employees are required to comply with the performance standards established by the department for which they work. Students who fail to perform in a satisfactory manner may be removed from their assignment and from the Student Employment program at any time.

Any student who accepts a student employee position accepts the responsibility of maintaining professional standards and agrees to:

1. Perform his or her job assignment in a serious and responsible manner. Student employees are required to adhere to the following rules and policies regarding the privacy and confidentiality of student records information:
 - A. Student records, in whole or in part, are not to be removed from any university office by student employees unless they are requested to do so by their supervisor.
 - B. Student employees granted access to student records information are accountable for the protection of the information and its contents while it is in their possession.
 - C. Accessing personal record information, that of family members, friends, or peers, is prohibited.
 - D. Discussing personal record information, that of family members, friends, or peers, is prohibited.
 - E. Discussing assignments outside the office is prohibited.
 - F. Making personal use of university equipment or office supplies is prohibited except as designated by a supervisor.
 - G. When given a work assignment that requires the use of the Student Information System, student employees are to access student information only for the assignment on which they are working.
 - H. Student employees are prohibited from working with their own records.

Employees, employee/students, and student employees are strictly prohibited from unauthorized access, entry, alteration, tampering, falsification, copying, or distribution of academic, personnel or payroll records. Violations shall include but not be limited to the alteration of grades or any other records related to the academic performance of students; registrations, drops, withdrawals, or overrides; alteration of pay, vacation, sick, or leave balances; or assisting, attempting to assist, or conspiring to assist another employee or student in committing the offenses outlined above. Employees, employee/students, and student employees in violation of this policy will be dismissed for cause, as well as subjected to a student judicial review process, which includes the possibility of expulsion from their academic program and the university.

Students must read, understand, and adhere to these rules and policies relative to privacy and confidentiality of student records information. Violation of the aforementioned rules or policies may subject a student employee to immediate termination of employment.

2. Follow a predetermined work schedule that is acceptable to both the student and the employer and **not report hours for scheduled class periods.**
3. Work a maximum of 20 hours per week (25 hours for FWS-eligible students) except when otherwise approved by the manager or assistant manager of Student Employment.
4. Not report unearned hours on their timesheet.

5. Notify the supervisor, as soon as possible, when illness or other circumstances prevent the student from working.
6. Dress appropriately, be dependable and prompt, and conduct themselves in a businesslike manner. Students in high-visibility areas should consult their supervisors for the appropriate dress code.
7. Not study or do homework assignments during working hours unless permitted by the supervisor.
8. Discuss any work-related problems with the supervisor.
9. Give the supervisor at least one week's notice before terminating a job assignment.
10. Not work in any position until the employment has been approved in writing by the Coordinator of Student Employment.
11. Notify the Office of Student Financial Services and Registration and the Coordinator of Student Employment if his or her enrollment status drops below half time.
12. Stop working immediately upon earning his or her Federal Work-Study award (unless otherwise approved in writing by the Office of Student Financial Services and Registration and the employing department).
13. Stop working immediately upon completion of all coursework towards his or her degree program. Students are not allowed to work during the period between coursework completion and their graduation ceremony.
14. Be enrolled continuously for one academic year (as determined by the program office), before taking a vacation, in order to be eligible to continue working.

I certify by my signature below that I have read, been informed of and understand these rules and policies. I further agree to adhere to all of these rules and policies. I understand that violation of the rules or policies may subject me to immediate termination of employment and possible disciplinary action being taken.

I understand it is a federal offense to falsify payroll time sheets and can expect disciplinary action and other measures to be imposed upon any such falsification.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an *"at will"* nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this *"at will"* employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Student's Signature

Date

Student's Name (*please print*)

N _____
NSU ID

ALL STUDENTS MUST COMPLETE A W-4

INTERNATIONAL STUDENTS: Please see instructions below for completing W-4. These instructions do not apply to U.S. Citizens and Resident Aliens.

The Internal Revenue Service (IRS) is the agency that is responsible for the collection of taxes in the United States. This agency has asked us to remind you about the importance of completing your Form W-4 so that the correct amount of taxes is withheld from your paycheck.

To withhold taxes from your paycheck, you must complete a Form W-4, Employee's Withholding Allowance Certificate. You are required to submit a completed Form W-4 before you are permitted to begin working. If you have already submitted a Form W-4, it is important that you have completed it correctly.

The Internal Revenue Service has suggested how our foreign students should complete the form. The example indicates that when you complete the certificate at the bottom you should:

- 1. Line number 3 - check the box for "Single" (even if you are married)**
- 2. Line number 5 - enter an amount of one (1)**
- 3. Line number 6 – on the DOTTED line write "Non-resident Alien"**
- 4. Leave line 7 blank. In most cases, foreign students are not exempt from having taxes withheld from their wages. If you think you may be exempt from having taxes withheld from your wages based on a tax treaty between your country and the United States or based on an IRS code, you must contact Aida Sanchez-Posadas, Payroll Director at (954)2627895 to request a Form 8233 and to obtain specific information regarding how to file the form.**

If you are a student, scholar, trainee, or teacher holding an F-1 visa you are exempt from Social Security and Medicare taxes as long as the services performed are for the purposes specified in your visa.

All foreign students are required to contact Aida Sanchez-Posadas , Payroll Director at (954)2627895 for further instructions on filing forms with the IRS.

This text borrowed in large part from a December 13, 2005 Payroll Department memorandum.

Form W-4 (2012)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2012 expires February 18, 2013. See Pub. 505, Tax Withholding and Estimated Tax.

Note. If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$950 and includes more than \$300 of unearned income (for example, interest and dividends).

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity

income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2012. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. The IRS has created a page on www.irs.gov for information about Form W-4, at www.irs.gov/w4. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted on that page.

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for yourself if no one else can claim you as a dependent	A	<u> </u>
B	Enter "1" if: { <ul style="list-style-type: none"> • You are single and have only one job; or • You are married, have only one job, and your spouse does not work; or • Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less. }	B	<u> </u>
C	Enter "1" for your spouse . But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)	C	<u> </u>
D	Enter number of dependents (other than your spouse or yourself) you will claim on your tax return	D	<u> </u>
E	Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above)	E	<u> </u>
F	Enter "1" if you have at least \$1,900 of child or dependent care expenses for which you plan to claim a credit (Note. Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)	F	<u> </u>
G	Child Tax Credit (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. • If your total income will be less than \$61,000 (\$90,000 if married), enter "2" for each eligible child; then less "1" if you have three to seven eligible children or less "2" if you have eight or more eligible children. • If your total income will be between \$61,000 and \$84,000 (\$90,000 and \$119,000 if married), enter "1" for each eligible child	G	<u> </u>
H	Add lines A through G and enter total here. (Note. This may be different from the number of exemptions you claim on your tax return.) ▶	H	<u> </u>
<p>For accuracy, complete all worksheets that apply. {</p> <ul style="list-style-type: none"> • If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the Deductions and Adjustments Worksheet on page 2. • If you are single and have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$40,000 (\$10,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to avoid having too little tax withheld. • If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below. 			

----- Separate here and give Form W-4 to your employer. Keep the top part for your records. -----

<p>Form W-4 Department of the Treasury Internal Revenue Service</p>	<h2>Employee's Withholding Allowance Certificate</h2> <p>▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</p>	<p>OMB No. 1545-0074</p> <h1 style="font-size: 2em;">2012</h1>
1 Your first name and middle initial	Last name	2 Your social security number
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.
City or town, state, and ZIP code		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ <input type="checkbox"/>
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)	5 <u> </u>	
6 Additional amount, if any, you want withheld from each paycheck	6 \$ <u> </u>	
7 I claim exemption from withholding for 2012, and I certify that I meet both of the following conditions for exemption. • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ▶ <u> </u>		
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.		
Employee's signature (This form is not valid unless you sign it.) ▶		Date ▶
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)	9 Office code (optional)	10 Employer identification number (EIN)

Deductions and Adjustments Worksheet

Note. Use this worksheet *only* if you plan to itemize deductions or claim certain credits or adjustments to income.

1	Enter an estimate of your 2012 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 7.5% of your income, and miscellaneous deductions	1	\$ _____
2	Enter: $\left\{ \begin{array}{l} \$11,900 \text{ if married filing jointly or qualifying widow(er)} \\ \$8,700 \text{ if head of household} \\ \$5,950 \text{ if single or married filing separately} \end{array} \right\}$	2	\$ _____
3	Subtract line 2 from line 1. If zero or less, enter “-0-”	3	\$ _____
4	Enter an estimate of your 2012 adjustments to income and any additional standard deduction (see Pub. 505)	4	\$ _____
5	Add lines 3 and 4 and enter the total. (Include any amount for credits from the <i>Converting Credits to Withholding Allowances for 2012 Form W-4</i> worksheet in Pub. 505.)	5	\$ _____
6	Enter an estimate of your 2012 nonwage income (such as dividends or interest)	6	\$ _____
7	Subtract line 6 from line 5. If zero or less, enter “-0-”	7	\$ _____
8	Divide the amount on line 7 by \$3,800 and enter the result here. Drop any fraction	8	_____
9	Enter the number from the Personal Allowances Worksheet , line H, page 1	9	_____
10	Add lines 8 and 9 and enter the total here. If you plan to use the Two-Earners/Multiple Jobs Worksheet , also enter this total on line 1 below. Otherwise, stop here and enter this total on Form W-4, line 5, page 1	10	_____

Two-Earners/Multiple Jobs Worksheet (See *Two earners or multiple jobs* on page 1.)

Note. Use this worksheet *only* if the instructions under line H on page 1 direct you here.

1	Enter the number from line H, page 1 (or from line 10 above if you used the Deductions and Adjustments Worksheet)	1	_____
2	Find the number in Table 1 below that applies to the LOWEST paying job and enter it here. However , if you are married filing jointly and wages from the highest paying job are \$65,000 or less, do not enter more than “3”	2	_____
3	If line 1 is more than or equal to line 2, subtract line 2 from line 1. Enter the result here (if zero, enter “-0-”) and on Form W-4, line 5, page 1. Do not use the rest of this worksheet	3	_____
Note. If line 1 is less than line 2, enter “-0-” on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.			
4	Enter the number from line 2 of this worksheet	4	_____
5	Enter the number from line 1 of this worksheet	5	_____
6	Subtract line 5 from line 4	6	_____
7	Find the amount in Table 2 below that applies to the HIGHEST paying job and enter it here	7	\$ _____
8	Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed	8	\$ _____
9	Divide line 8 by the number of pay periods remaining in 2012. For example, divide by 26 if you are paid every two weeks and you complete this form in December 2011. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck	9	\$ _____

Table 1

Table 2

Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from LOWEST paying job are—	Enter on line 2 above	If wages from LOWEST paying job are—	Enter on line 2 above	If wages from HIGHEST paying job are—	Enter on line 7 above	If wages from HIGHEST paying job are—	Enter on line 7 above
\$0 - \$5,000	0	\$0 - \$8,000	0	\$0 - \$70,000	\$570	\$0 - \$35,000	\$570
5,001 - 12,000	1	8,001 - 15,000	1	70,001 - 125,000	950	35,001 - 90,000	950
12,001 - 22,000	2	15,001 - 25,000	2	125,001 - 190,000	1,060	90,001 - 170,000	1,060
22,001 - 25,000	3	25,001 - 30,000	3	190,001 - 340,000	1,250	170,001 - 375,000	1,250
25,001 - 30,000	4	30,001 - 40,000	4	340,001 and over	1,330	375,001 and over	1,330
30,001 - 40,000	5	40,001 - 50,000	5				
40,001 - 48,000	6	50,001 - 65,000	6				
48,001 - 55,000	7	65,001 - 80,000	7				
55,001 - 65,000	8	80,001 - 95,000	8				
65,001 - 72,000	9	95,001 - 120,000	9				
72,001 - 85,000	10	120,001 and over	10				
85,001 - 97,000	11						
97,001 - 110,000	12						
110,001 - 120,000	13						
120,001 - 135,000	14						
135,001 and over	15						

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.



PLEASE READ BEFORE COMPLETING FORM I-9

DO NOT COMPLETE THE FORM I-9 (EMPLOYMENT ELIGIBILITY VERIFICATION) UNLESS YOU HAVE ALREADY BEEN OFFERED OR HAVE ACCEPTED A POSITION

STUDENTS WHO LATER ACCEPT A POSITION MUST RETURN TO STUDENT EMPLOYMENT TO COMPLETE THE FORM I-9 AND PRESENT ORIGINAL DOCUMENTS FROM LIST A OR LIST B **AND** LIST C (SEE BACK PAGE OF I-9).

NO STUDENT IS PERMITTED TO BEGIN WORKING UNTIL THE I-9 HAS BEEN COMPLETED (INCLUDING PRESENTING ORIGINAL DOCUMENTS)

AFTER COMPLETING THE I-9, SUPERVISORS WILL BE NOTIFIED WITHIN 2-4 BUSINESS DAYS THAT THE STUDENT HAS BEEN CLEARED AND READY TO BE PLACED ON THE WORK SCHEDULE

NSU participates in the E-Verify Employment Eligibility program operated by the Department of Homeland Security (DHS).

Instructions**Read all instructions carefully before completing this form.**

Anti-Discrimination Notice. It is illegal to discriminate against any individual (other than an alien not authorized to work in the United States) in hiring, discharging, or recruiting or referring for a fee because of that individual's national origin or citizenship status. 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 presented have a future expiration date may also constitute illegal discrimination. For more information, call the Office of Special Counsel for Immigration Related Unfair Employment Practices at 1-800-255-8155.

What Is the Purpose of This Form?

The purpose of this form is to document that each new employee (both citizen and noncitizen) hired after November 6, 1986, is authorized to work in the United States.

When Should Form I-9 Be Used?

All employees (citizens and noncitizens) hired after November 6, 1986, and working in the United States must complete Form I-9.

Filling Out Form I-9**Section 1, Employee**

This part of the form must be completed no later than the time of hire, which is the actual beginning of employment. Providing the Social Security Number is voluntary, except for employees hired by employers participating in the USCIS Electronic Employment Eligibility Verification Program (E-Verify). **The employer is responsible for ensuring that Section 1 is timely and properly completed.**

Noncitizen nationals of the United States are persons born in American Samoa, certain former citizens of the former Trust Territory of the Pacific Islands, and certain children of noncitizen nationals born abroad.

Employers should note the work authorization expiration date (if any) shown in **Section 1**. For employees who indicate an employment authorization expiration date in **Section 1**, employers are required to reverify employment authorization for employment on or before the date shown. Note that some employees may leave the expiration date blank if they are aliens whose work authorization does not expire (e.g., asylees, refugees, certain citizens of the Federated States of Micronesia or the Republic of the Marshall Islands). For such employees, reverification does not apply unless they choose to present

in **Section 2** evidence of employment authorization that contains an expiration date (e.g., Employment Authorization Document (Form I-766)).

Preparer/Translator Certification

The Preparer/Translator Certification must be completed if **Section 1** is prepared by a person other than the employee. A preparer/translator may be used only when the employee is unable to complete **Section 1** on his or her own. However, the employee must still sign **Section 1** personally.

Section 2, Employer

For the purpose of completing this form, the term "employer" means all employers including those recruiters and referrers for a fee who are agricultural associations, agricultural employers, or farm labor contractors. Employers must complete **Section 2** by examining evidence of identity and employment authorization within three business days of the date employment begins. However, if an employer hires an individual for less than three business days, **Section 2** must be completed at the time employment begins. Employers cannot specify which document(s) listed on the last page of Form I-9 employees present to establish identity and employment authorization. Employees may present any List A document **OR** a combination of a List B and a List C document.

If an employee is unable to present a required document (or documents), the employee must present an acceptable receipt in lieu of a document listed on the last page of this form. Receipts showing that a person has applied for an initial grant of employment authorization, or for renewal of employment authorization, are not acceptable. Employees must present receipts within three business days of the date employment begins and must present valid replacement documents within 90 days or other specified time.

Employers must record in Section 2:

1. Document title;
2. Issuing authority;
3. Document number;
4. Expiration date, if any; and
5. The date employment begins.

Employers must sign and date the certification in **Section 2**. Employees must present original documents. Employers may, but are not required to, photocopy the document(s) presented. If photocopies are made, they must be made for all new hires. Photocopies may only be used for the verification process and must be retained with Form I-9. **Employers are still responsible for completing and retaining Form I-9.**

For more detailed information, you may refer to the *USCIS Handbook for Employers* (Form M-274). You may obtain the handbook using the contact information found under the header "USCIS Forms and Information."

Section 3, Updating and Reverification

Employers must complete **Section 3** when updating and/or reverifying Form I-9. Employers must reverify employment authorization of their employees on or before the work authorization expiration date recorded in **Section 1** (if any). Employers **CANNOT** specify which document(s) they will accept from an employee.

- A. If an employee's name has changed at the time this form is being updated/reverified, complete Block A.
- B. If an employee is rehired within three years of the date this form was originally completed and the employee is still authorized to be employed on the same basis as previously indicated on this form (updating), complete Block B and the signature block.
- C. If an employee is rehired within three years of the date this form was originally completed and the employee's work authorization has expired or if a current employee's work authorization is about to expire (reverification), complete Block B; and:
 - 1. Examine any document that reflects the employee is authorized to work in the United States (see List A or C);
 - 2. Record the document title, document number, and expiration date (if any) in Block C; and
 - 3. Complete the signature block.

Note that for reverification purposes, employers have the option of completing a new Form I-9 instead of completing **Section 3**.

What Is the Filing Fee?

There is no associated filing fee for completing Form I-9. This form is not filed with USCIS or any government agency. Form I-9 must be retained by the employer and made available for inspection by U.S. Government officials as specified in the Privacy Act Notice below.

USCIS Forms and Information

To order USCIS forms, you can download them from our website at www.uscis.gov/forms or call our toll-free number at 1-800-870-3676. You can obtain information about Form I-9 from our website at www.uscis.gov or by calling 1-888-464-4218.

Information about E-Verify, a free and voluntary program that allows participating employers to electronically verify the employment eligibility of their newly hired employees, can be obtained from our website at www.uscis.gov/e-verify or by calling 1-888-464-4218.

General information on immigration laws, regulations, and procedures can be obtained by telephoning our National Customer Service Center at 1-800-375-5283 or visiting our Internet website at www.uscis.gov.

Photocopying and Retaining Form I-9

A blank Form I-9 may be reproduced, provided both sides are copied. The Instructions must be available to all employees completing this form. Employers must retain completed Form I-9s for three years after the date of hire or one year after the date employment ends, whichever is later.

Form I-9 may be signed and retained electronically, as authorized in Department of Homeland Security regulations at 8 CFR 274a.2.

Privacy Act Notice

The authority for collecting this information is the Immigration Reform and Control Act of 1986, Pub. L. 99-603 (8 USC 1324a).

This information is for employers to verify the eligibility of individuals for employment to preclude the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States.

This information will be used by employers as a record of their basis for determining eligibility of an employee to work in the United States. The form will be kept by the employer and made available for inspection by authorized officials of the Department of Homeland Security, Department of Labor, and Office of Special Counsel for Immigration-Related Unfair Employment Practices.

Submission of the information required in this form is voluntary. However, an individual may not begin employment unless this form is completed, since employers are subject to civil or criminal penalties if they do not comply with the Immigration Reform and Control Act of 1986.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 12 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., 3rd Floor, Suite 3008, Washington, DC 20529-2210. OMB No. 1615-0047. **Do not mail your completed Form I-9 to this address.**

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

Form I-9, Employment Eligibility Verification

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 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 Information and Verification (To be completed and signed by employee at the time employment begins.)

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 am (check one of the following):

- A citizen of the United States
- A noncitizen national of the United States (see instructions)
- A lawful permanent resident (Alien #) _____
- An alien authorized to work (Alien # or Admission #) _____ until (expiration date, if applicable - month/day/year)

Employee's Signature	Date (month/day/year)
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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 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).)

List A	OR	List B	AND	List C
Document title: _____		_____		_____
Issuing authority: _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): _____		_____		_____

CERTIFICATION: I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that 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) _____ and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

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)
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C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment authorization.

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 presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Date (month/day/year)
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LISTS OF ACCEPTABLE DOCUMENTS

All documents must be unexpired

LIST A

Documents that Establish Both
Identity and Employment
Authorization

LIST B

Documents that Establish
Identity

LIST C

Documents that Establish
Employment Authorization

OR

AND

1. U.S. Passport or U.S. Passport Card	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. 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
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		
3. Foreign passport that contains a temporary I-551 stamp or temporary 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 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)
4. Employment Authorization Document that contains a photograph (Form I-766)	3. School ID card with a photograph	3. Certification of Report of Birth issued by the Department of State (Form DS-1350)
	4. Voter's registration card	
5. In the case of a nonimmigrant alien authorized to work for a specific employer incident to status, a foreign passport with Form I-94 or Form I-94A bearing the same name as the passport and containing an endorsement of the alien's nonimmigrant status, as long as the period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form	5. U.S. Military card or draft record	4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	6. Military dependent's ID card	
	7. U.S. Coast Guard Merchant Mariner Card	5. Native American tribal document
	8. Native American tribal document	6. U.S. Citizen ID Card (Form I-197)
	9. Driver's license issued by a Canadian government authority	
	For persons under age 18 who are unable to present a document listed above:	
6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI	10. School record or report card	8. Employment authorization document issued by the Department of Homeland Security
	11. Clinic, doctor, or hospital record	
	12. Day-care or nursery school record	

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