


Section 1: Employee Information

Section 1. Employee Information and Attestation *(Employees must complete and sign Section 1 of Form I-9 no later than the **first day of employment**, but not before accepting a job offer.)*

Last Name (Family Name) ?		First Name (Given Name) ?		Middle Initial ?	Other Last Names Used (if any) ?	
Address (Street Number and Name) ?		Apt. Number ?	City or Town ?		State ? 	ZIP Code ?
Date of Birth (mm/dd/yyyy) ?	U.S. Social Security Number ?		Employee's E-mail Address ?		Employee's Telephone Number ?	

- To be completed by **EMPLOYEE**.
- Employer **MUST** verify **Section 1** is **COMPLETE**.