



Cooperating Teacher/Field Supervisor Instructions for Completing I – 9 and W-4 Forms

I-9 Form

Please complete Page 1 of the I-9 Form exactly as shown in the sample below. Please pay special attention to these  areas of I-9. Also, ensure you fill in every space—do not leave any space blank. Our Human Resources Dept. requires us to **submit the original form—do not submit via fax or email.**

Page 1 of I-9

Complete Section 1. Employee Information and Attestation.

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

USCIS
Form I-9
OMB No. 1615-0047
Expires 08/31/2019

► **START HERE:** Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify what document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

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

Last Name (Family Name) Major	First Name (Given Name) Ursula	Middle Initial M.	Other Last Names Used (if any) N/A
Address (Street Number and Name) 1234 Galaxy Ave.		Apt. Number N/A	City or Town Bozeman
Date of Birth (mm/dd/yyyy) 08/08/2018		U.S. Social Security Number 111-11-1111	Employee's E-mail Address ursulamajor@caseiopia.edu
		Employee's Telephone Number (406) 123-4567	State MT
		ZIP Code 59715	

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

☒ 1. A citizen of the United States

☐ 2. A noncitizen national of the United States (See instructions)

☐ 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____

☐ 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____
Some aliens may write "N/A" in the expiration date field. (See instructions)

Aliens authorized to work must provide only one of the following document numbers to complete Form I-9:
An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.

1. Alien Registration Number/USCIS Number: _____
OR

2. Form I-94 Admission Number: _____
OR

3. Foreign Passport Number: _____
Country of Issuance: _____

Signature of Employee
Ursula M. Major

Today's Date (mm/dd/yyyy)
08/08/2018

Preparer and/or Translator Certification (check one):

☒ I did not use a preparer or translator. ☐ A preparer(s) and/or translator(s) assisted the employee in completing Section 1.
(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)

I attest, under penalty of perjury, that I have assisted in the completion of this form and that the information is true and correct.

Signature of Preparer or Translator

Last Name (Family Name)

Address (Street Number and Name)

City

Do not leave blank. If no middle initial, no other name, or no Apt. Number, write "N/A."

Use correct date format: mm/dd/yyyy:

Yes! **08/08/2018**

No ☹️ **8/8/18**

Unfortunately, if you do not use correct format, we will have to return the I-9 form for you to correct. ☹️

Use this format: (406) 888-8888


If you are a US Citizen, check the first box. Otherwise, check appropriate box and/or fill in the information.

If you completed this form, check the first box.

An original signature is required. You may not "type" in your signature.

IMPORTANT: Do not fill in the bottom of I-9 if you completed the form.

Page 2 of I-9

Section 2. Employer or Authorized Representative Review and Verification must be completed by a Human Resources or Administrator or any individual with I-9 training. **Not to be completed by the employee.** Please pay special attention to these  areas. **Remember to use correct date format (mm/dd/yyyy) in any area that is requesting a date.**

IMPORTANT!!

Read the instructions on the next page for List of Acceptable Documents. To reiterate:

List A = 1 document

If you select a document from List B then you will also need to select a document from List C.

Information under the "Certification: I attest..." is the representative completing Section 2 information. Please use a physical address...no P.O. Box.



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

If no middle name, write "N/A."

USCIS
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Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")

Employee Info from Section 1		Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
List A Identity and Employment Authorization OR List B Identity AND List C Employment Authorization					
Document Title	Document Title	Document Title	Document Title	Document Title	Document Title
Issuing Authority	Issuing Authority	Issuing Authority	Issuing Authority	Issuing Authority	Issuing Authority
Document Number	Document Number	Document Number	Document Number	Document Number	Document Number
Expiration Date (if any)(mm/dd/yyyy)	Expiration Date (if any)(mm/dd/yyyy)	Expiration Date (if any)(mm/dd/yyyy)	Expiration Date (if any)(mm/dd/yyyy)	Expiration Date (if any)(mm/dd/yyyy)	Expiration Date (if any)(mm/dd/yyyy)
Document Title	Additional Information		QR Code - Sections 2 & 3 Do Not Write in This Space		
Issuing Authority					
Document Number					
Expiration Date (if any)(mm/dd/yyyy)					
Document Title					
Issuing Authority					
Document Number					
Expiration Date (if any)(mm/dd/yyyy)					

Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): (See instructions for exemptions)

Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	Title of Employer or Authorized Representative
Last Name of Employer or Authorized Representative	First Name of Employer or Authorized Representative	Employer's Business or Organization Name
Employer's Business or Organization Address (Street Number and Name)		City or Town
State		ZIP Code

Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.)

A. New Name (if applicable)	B. Date of Rehire (if applicable)
Last Name (Family Name)	
C. If the employee's continuing employment is established by a new document	
Document Title	
Issuing Authority	
Document Number	
Expiration Date (if any)(mm/dd/yyyy)	
I attest, under penalty of perjury, that the employee presented for rehire is the same individual as the employee previously employed by me.	
Signature of Employer or Authorized Representative	

Do not complete Section 3.

The MSU Human Resources Department will complete this section.

This information should be the same as marked on Pg. 1, # 1 of I-9. For example, if employee checked they were "A citizen of the United States," then write in, "1 - US Citizen."

If employee checked any other box, representative should fill in Immigration Status here.

First day of employment is:

Leave this BLANK

Use correct date format for "Today's Date":
mm/dd/yyyy.

Yes! ☺ 08/08/2018

No ☹ 8/8/18

Unfortunately, if you do not use correct format, we will have to return the I-9 form for you to correct. ☹

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Submit a copy of the document(s) from lists of acceptable documents below for verification of employment identity.

- If you select a document from List A, you do not need to submit any other documents. Only one document is submitted.
- If you select a document from List B, you will also need to select a document from List C.

LISTS OF ACCEPTABLE DOCUMENTS		
All documents must be UNEXPIRED		
Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.		
LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity AND LIST C Documents that Establish Employment Authorization
<ol style="list-style-type: none">1. U.S. Passport or U.S. Passport Card2. 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 visa4. Employment Authorization Document that contains a photograph (Form I-766)5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:<ol style="list-style-type: none">a. Foreign passport; andb. Form I-94 or Form I-94A that has the following:<ol style="list-style-type: none">(1) The same name as the passport; and(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.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		<ol style="list-style-type: none">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 address2. 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 address3. School ID card with a photograph4. Voter's registration card5. U.S. Military card or draft record6. Military dependent's ID card7. U.S. Coast Guard Merchant Mariner Card8. Native American tribal document9. Driver's license issued by a Canadian government authorityFor persons under age 18 who are unable to present a document listed above:<ol style="list-style-type: none">10. School record or report card11. Clinic, doctor, or hospital record12. Day-care or nursery school record1. A Social Security Account Number card, unless the card includes one of the following restrictions:<ol style="list-style-type: none">(1) NOT VALID FOR EMPLOYMENT(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal4. Native American tribal document5. U.S. Citizen ID Card (Form I-197)6. Identification Card for Use of Resident Citizen in the United States (Form I-179)7. Employment authorization document issued by the Department of Homeland Security

List A = 1 Document

If you submit a document from List A, for example:

1. US Passport or US Passport Card

--you **do not** need to submit a document from List B or List C.


IMPORTANT:

You may not use two documents from List B. You must select a document from List B **and** List C.

Examples of many of these documents appear in Part 13 of the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

W-4 Form

All you need to submit to the Field Placement & Licensure Office is the actual W-4 form. We do not need the worksheets from the W-4. Please pay special attention to these  areas of W-4.

Form W-4 (2018)

Future developments. For the latest information about any future developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

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. You may claim exemption from withholding for 2018 if both of the following apply.

- For 2017 you had a right to a refund of all federal income tax withheld because you had no tax liability, and
- For 2018 you expect a refund of all federal income tax withheld because you expect to have no tax liability.

If you're exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2018 expires February 15, 2019. See Pub. 505, Tax Withholding and Estimated Tax, to learn more about whether you qualify for exemption from withholding.

General Instructions

If you aren't exempt, follow the rest of these instructions to determine the number of withholding allowances you should claim for withholding for 2018 and any additional amount of tax to have withheld. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

You can also use the calculator at www.irs.gov/W4App to determine your tax withholding more accurately. Consider

using this calculator if you have a more complicated tax situation, such as if you have a working spouse, more than one job, or a large amount of nonwage income outside of your job. After your Form W-4 takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2018. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax withheld, you will owe tax when you file your tax return, and you might owe a penalty.

Filers with multiple jobs or working spouses. If you have more than one job at a time, or if you're married and your spouse is also working, read all of the instructions including the instructions for the Two-Earners/Multiple Jobs Worksheet before beginning.

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 might owe additional tax. Or, you can use the Deductions, Adjustments, and Other Income Worksheet on page 3 or the calculator at www.irs.gov/W4App to make sure you have enough tax withheld from your paycheck. If you have pension or annuity income, see Pub. 505 or use the calculator at www.irs.gov/W4App to adjust your withholding for W-4P. If you're a nonresident supplemental Form W-4, see the instructions for Resident Aliens, Form W-4.

Specific Instructions

Personal Allowances Worksheet

Complete this worksheet on page 3 first to determine the number of withholding allowances to claim.

Line C. Head of household please note: Generally, you can claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

Line E. Child tax credit. When you file your tax return, you might be eligible to claim a credit for each of your qualifying children. To qualify, the child must be under age 17 as of December 31 and must be your dependent who lives with you for more than half the year. To learn more about this credit, see Pub. 972, Child Tax Credit. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet you will be asked about your total income. For this purpose, total income includes all of your wages and other income, including income earned by a spouse, during the year.

Line F. Credit for other dependents. When you file your tax return, you might be eligible to claim a credit for each of your dependents that don't qualify for the child tax credit, such as any dependent child age 17 and older. To learn more about this credit, see Pub. 505. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line F of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total income includes all of

Make sure to check one of the boxes under #3.

#5. This is the number of deductions/allowances you want taken out of your paycheck, if any.

Fill in your information for #1 and #2.

Separate here and give to your employer. Keep the worksheet(s) for your records.

W-4 Form Department of the Treasury Internal Revenue Service		Employee's Withholding Allowance Certificate		OMB No. 1545-0074
▶ Whether you're 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.		2018		
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.		
City or town, state, and ZIP code		Note: If married filing separately, check "Married, but withhold at higher Single rate."		
		4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card. <input type="checkbox"/>		
5 Total number of allowances you're claiming (from the applicable worksheet on the following pages)	5			
6 Additional amount, if any, you want withheld from each paycheck	6 \$			
7 I claim exemption from withholding for 2018, and I certify that I meet both of the following conditions for exemption.				
<ul style="list-style-type: none"> • 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				
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 boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.)		9 First date of employment	Employer identification number (EIN)	

For Privacy Act and Paperwork Reduction Act Notice, see page 4.

Cat. No. 10220Q

Form W-4 (2018)

Make sure to sign and date the bottom of W-4.