

# APPLICATION FOR EMPLOYMENT (NON-SALES)

PLUTUS Environmental Technologies, Inc.

**FORM 101**

Version 2004.1

*We Thank You For Your Desire To Help Us And Our Clients Clean Up Our Environment*

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PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE. APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS. PLEASE COMPLETE ALL ENTRIES ON ALL PAGES. USE "N/A" OR "NONE" WHERE APPLICABLE. PLEASE SUBMIT ORIGINAL TO [careers@plutusonline.com](mailto:careers@plutusonline.com)

<b>APPLICANT INFORMATION</b>				DATE:	
Name: _____					
Last	First	Middle	Maiden		
Present address: _____					
Number	Street	City	State	Zip	
How long:    years    months			Social Security No.    -    -		
Telephone: (    )    -    , Extn					
If under 18, please list age:					
Position(s) applied for:			Days/hours available to work		
(1)			<input type="checkbox"/> MON	<input type="checkbox"/> FRI	
(2)			<input type="checkbox"/> TUE	<input type="checkbox"/> SAT	
(3)			<input type="checkbox"/> WED	<input type="checkbox"/> SUN	
			<input type="checkbox"/> THU	<input type="checkbox"/> NO PREF	
How many hours can you work weekly?			Can you work nights?		
Employment desired: <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME					
When available for work?					
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR AND DEGREE	
High School					
College					
Bus. or Trade School					
Professional School					
HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> No <input type="checkbox"/> Yes (If YES: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor)					
If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.					

PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT <b>X</b>	DATE
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DO YOU HAVE A DRIVER'S LICENSE? <input type="checkbox"/> Yes <input type="checkbox"/> No			
What is your means of transportation to work?			
Driver's License No.	State of issue:	Expiration date:	
Type: <input type="checkbox"/> Operator <input type="checkbox"/> Commercial (CDL) <input type="checkbox"/> Chauffeur			
Have you had any accidents during the past three years?			How many?
Have you had any moving violations during the past three years?			How Many?
Typing <input type="checkbox"/> Yes <input type="checkbox"/> No	WPM	10-key <input type="checkbox"/> Yes <input type="checkbox"/> No	Word Processing <input type="checkbox"/> Yes <input type="checkbox"/> No
Personal Computer <input type="checkbox"/> Yes <input type="checkbox"/> No	PC <input type="checkbox"/> Mac <input type="checkbox"/>	Other Skills	

## PERSONAL REFERENCES

Please list two references other than relatives or previous employers.

Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Telephone: (    )    -    Extn	Telephone: (    )    -    Extn

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.


PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT <b>X</b>	DATE
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## MILITARY EXPERIENCE

HAVE YOU EVER BEEN IN THE ARMED FORCES?  Yes  No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?  Yes  No

Specialty: \_\_\_\_\_ Date Entered: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

### Work Experience

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer and Address:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final

Phone: (     )     -     Extn

Your last job title:

Reason for leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of Employer and Address:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final

Phone: (     )     -     Extn

Your last job title:

Reason for leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT <b>X</b>	DATE
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Work Experience	Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.		
Name of Employer and Address:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
Phone: (    )    -    Extn	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
Name of Employer and Address:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
Phone: (    )    -    Extn	Your last job title:		
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Did you complete this application yourself <input type="checkbox"/> Yes <input type="checkbox"/> No
If not, who did?

PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT <b>X</b>	DATE
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## WRITTEN PERSONAL STATEMENT

Please write a summary of why you feel you would be an asset to our Company and why we should hire you over other Applicants applying for the same position(s).

PRINTED NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE

**X**

*We Thank You For Your Desire To Help Us And Our Clients Clean Up Our Environment*

<b>PLEASE READ CAREFULLY</b>		
<b>APPLICATION FORM WAIVER</b>		
<p>In exchange for the consideration of my job application by PLUTUS Environmental Technologies, Inc., (hereinafter called "the Company"), I agree that:</p> <p>Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee the Company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.</p>		
<p>I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.</p>		
<p>I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.</p>		
<p>I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.</p>		
<p>I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.</p>		
<p>This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.</p>		
<b>Thank you for completing this application form and for your interest in our business.</b>		

PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT <b>X</b>	DATE
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# EMPLOYMENT REFERENCE CHECK

PLUTUS Environmental Technologies, Inc.

**FORM 103**

Version 2004.1

*We Thank You For Your Desire To Help Us And Our Clients Clean Up Our Environment*

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Date: \_\_\_\_\_

To:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE RETURN COMPLETED FORM TO:**

**PLUTUS Environmental Technologies, Inc.**  
**807 Mize Lane**  
**Sevierville, TN 37862-3027**  
**Phone (865) 453-0060 Fax (865) 908-6652**

*A return envelope has been provided for your convenience. Thank You for your assistance.*

\_\_\_\_\_  
**Applicant Name (please print)**

\_\_\_\_\_  
**Social Security Number**

Dear: \_\_\_\_\_,

The above referenced person is applying for a position with our company, PLUTUS Environmental Technologies, Inc. He/she has informed us of employment with your company/agency and signed our employment application stating we may contact you for a reference. Your responses to the following questions will assist us in making a decision.

<b>Dates of Employment</b> <i>(Start Date – End Date)</i>	<b>Job Title – Position</b>

Would you re-employ this person?  YES  NO

If "NO", please check one of the following and explain your answer:  Performance  Conduct

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## APPLICANT INFORMATION RELEASE:

I hereby authorize any person, educational institution, or company I have listed as a reference on my employment application to disclose in good faith any information they may have regarding my qualifications and fitness for employment. I will hold PLUTUS Environmental Technologies, Inc., any former employers, educational institutions, and any other persons giving references free of liability for the exchange of this information and any other reasonable and necessary information incident to the employment process.

PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT <b>X</b>	DATE
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# CONFIDENTIALITY AGREEMENT (NON-DISCLOSURE)

PLUTUS Environmental Technologies, Inc.

**FORM 107**

Version 2004.1

*Absolutely, the Best Solutions for Hydrocarbon Problems on the Market Today...Period*

**Page 1/1**

This Agreement is made this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_\_, between PLUTUS Environmental Technologies, Inc., hereafter referred to as "PLUTUS," and:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Company/Firm/Organization

\_\_\_\_\_  
Address

hereafter referred to as "Confidant."

In connection with negotiations with PLUTUS involving any and all matters and transactions, confidential information is being disclosed by PLUTUS to Confidant. In consideration of the receipt of such information, Confidant agrees to the following terms and conditions: The term "PROPRIETARY INFORMATION" as used herein means all information, samples, data, technology, designs, or any other non-public information relating to the transaction provided to Confidant by or on the behalf of PLUTUS whether transmitted in writing or orally, or provided before or after the date of this Agreement, except for: A) Information which at the time of disclosure is in the public domain; B) Information which, after disclosure, enters the public domain except where such entering is a result of a breach of this agreement or any other agreement of confidentiality; C) Information which is independently obtained by Confidant free from any obligation of confidentiality.

Confidant shall: 1) Hold in strict confidence all PROPRIETARY INFORMATION, using at a minimum the same degree of care to avoid disclosure of such PROPRIETARY INFORMATION as Confidant uses with respect to its own confidential information of like importance; 2) Use the PROPRIETARY INFORMATION solely for the purpose of determining Confidant interest in proceeding with the negotiations and the possible purchase or exchange of Confidant property and any other business which may be conducted between PLUTUS and Confidant; 3) Confidant shall not disclose any PROPRIETARY INFORMATION to its employees, affiliates, or outside advisors (such as lawyers and accountants), unless such individuals have (a) a need to know the information for a purpose specifically allowed under this confidentiality agreement, and (b) have a like obligation or confidentiality as to Confidant or is duly informed by Confidant of the nature of the PROPRIETARY INFORMATION; 4) If Confidant is required or requested by legal process to disclose any of the PROPRIETARY INFORMATION, Confidant agrees to provide PLUTUS with prompt notice of such requirements so that PLUTUS may seek an appropriate protective order and/or waive compliance by and with the provisions of this agreement, as PLUTUS in its sole discretion appropriate; 5) Confidant agrees not to disclose to anyone other than those employees to whom disclosure may be made in accordance with Paragraph 3 above, that the subject negotiations are occurring, nor that any PROPRIETARY INFORMATION is being furnished to Confidant by PLUTUS; 6) Confidant agrees to return all documents and other materials, which incorporate PROPRIETARY INFORMATION upon demand by PLUTUS, or if the negotiations/discussions herein referenced are terminated. Confidant shall also deliver to PLUTUS at such time all other written or computer-stored materials containing, reflecting, or based on any information contained in the PROPRIETARY INFORMATION (whether prepared by PLUTUS or otherwise), and Confidant will retain no copies, extracts, or other reproductions in whole or in part of such PROPRIETARY INFORMATION; 7) Confidant understands and agrees that PLUTUS makes no representation warranty whatsoever as to the accuracy and/or completeness of any information or material provided in connection with this transaction, including PROPRIETARY INFORMATION, and neither PLUTUS nor its employees or representatives shall have any liability therefore; 8) Confidant understands and agrees that PLUTUS, at its sole discretion, reserves all rights prior to entering into a definitive agreement with Confidant, should same ever occur, to negotiate with one or more other parties which may enter into a transaction with PLUTUS such as it is under discussion with Confidant and no notices thereof are required. It is agreed and understood that PLUTUS reserves the right to initiate or to terminate further participation in the negotiation and/or proposal process in connection with the subject transaction with anyone whomsoever, including Confidant, at any time. Moreover, unless and until such a definitive written agreement is entered into, Confidant and PLUTUS will not be under any legal obligation of any kind whatsoever with respect to transaction except for the matters specifically provided for in this Agreement; 9) All confidentiality agreements set forth in any subsequent agreement of purchase and sale or trade shall be cumulative and additional to the ones herein stated; 10) This agreement shall be governed and construed in accordance with the Laws of the State of Delaware; 11) This agreement may not be modified or amended except in writing by duly authorized representatives of the parties; 12) The below-signed Confidant affirms that he/she is authorized to execute this agreement on behalf of the Confidant's organization/firm; This agreement shall become effective on the date written above and shall continue in effect until terminated in writing by mutual agreement of PLUTUS and Confidant. Confidant's obligation to protect confidentiality of PROPRIETARY INFORMATION received prior to such termination shall survive the agreement for an indefinite period of years.

## CONFIDANT

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

## PLUTUS

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

# Employment Eligibility Verification

## INSTRUCTIONS

PLEASE 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 U.S.) 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 eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

**Section 1 - Employee.** All employees, citizens and noncitizens, hired after November 6, 1986, must complete Section 1 of this form at the time of hire, which is the actual beginning of employment. **The employer is responsible for ensuring that Section 1 is timely and properly completed.**

**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/her own. However, the employee must still sign Section 1.

**Section 2 - Employer.** For the purpose of completing this form, the term "employer" includes 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 eligibility within three (3) business days of the date employment begins. If employees are authorized to work, but are unable to present the required document(s) within three business days, they must present a receipt for the application of the document(s) within three business days and the actual document(s) within ninety (90) days. However, if employers hire individuals for a duration of less than three business days, Section 2 must be completed at the time employment begins. **Employers must record: 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. Employees must present original documents. Employers may, but are not required to, photocopy the document(s) presented. These photocopies may only be used for the verification process and must be retained with the I-9. **However, employers are still responsible for completing the I-9.**

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

- If an employee's name has changed at the time this form is being updated/ reverified, complete Block A.
- If an employee is rehired within three (3) years of the date this form was originally completed and the employee is still eligible to be employed on the same basis as previously indicated on this form (updating), complete Block B and the signature block.

- If an employee is rehired within three (3) 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:
  - examine any document that reflects that the employee is authorized to work in the U.S. (see List A or C),
  - record the document title, document number and expiration date (if any) in Block C, and complete the signature block.

**Photocopying and Retaining Form I-9.** A blank 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 I-9s for three (3) years after the date of hire or one (1) year after the date employment ends, whichever is later.

**For more detailed information, you may refer to the INS Handbook for Employers, (Form M-274). You may obtain the handbook at your local INS office.**

**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 officials of the U.S. Immigration and Naturalization Service, the Department of Labor and the 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.

**Reporting Burden.** We try to create forms and instructions that are accurate, can be easily understood and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. Accordingly, the reporting burden for this collection of information is computed as follows: **1) learning about this form, 5 minutes; 2) completing the form, 5 minutes; and 3) assembling and filing (recordkeeping) the form, 5 minutes, for an average of 15 minutes per response.** If you have comments regarding the accuracy of this burden estimate, or suggestions for making this form simpler, you can write to the Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4034, Washington, DC 20536. OMB No. 1115-0136.

# Employment Eligibility Verification

Please 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 eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of 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 #
<b>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.</b>		I attest, under penalty of perjury, that I am (check one of the following): <input type="checkbox"/> A citizen or national of the United States <input type="checkbox"/> A Lawful Permanent Resident (Alien # A _____) <input type="checkbox"/> An alien authorized to work until ___/___/___ (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.) 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 eligible 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	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 eligibility.

Document Title: \_\_\_\_\_ Document #: \_\_\_\_\_ Expiration Date (if any): \_\_\_/\_\_\_/\_\_\_

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible 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)
--	-----------------------

## LISTS OF ACCEPTABLE DOCUMENTS

LIST A	LIST B	LIST C
<p><b>Documents that Establish Both Identity and Employment Eligibility</b></p>	<p><b>Documents that Establish Identity</b></p>	<p><b>Documents that Establish Employment Eligibility</b></p>
<ol style="list-style-type: none"> <li>1. U.S. Passport (unexpired or expired)</li> <li>2. Certificate of U.S. Citizenship (<i>INS Form N-560 or N-561</i>)</li> <li>3. Certificate of Naturalization (<i>INS Form N-550 or N-570</i>)</li> <li>4. Unexpired foreign passport, with <i>I-551 stamp</i> or attached <i>INS Form I-94</i> indicating unexpired employment authorization</li> <li>5. Permanent Resident Card or Alien Registration Receipt Card with photograph (<i>INS Form I-151 or I-551</i>)</li> <li>6. Unexpired Temporary Resident Card (<i>INS Form I-688</i>)</li> <li>7. Unexpired Employment Authorization Card (<i>INS Form I-688A</i>)</li> <li>8. Unexpired Reentry Permit (<i>INS Form I-327</i>)</li> <li>9. Unexpired Refugee Travel Document (<i>INS Form I-571</i>)</li> <li>10. Unexpired Employment Authorization Document issued by the INS which contains a photograph (<i>INS Form I-688B</i>)</li> </ol>	OR	<ol style="list-style-type: none"> <li>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</li> <li>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</li> <li>3. School ID card with a photograph</li> <li>4. Voter's registration card</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> </ol> <p style="text-align: center; font-weight: bold; margin: 5px 0;">For persons under age 18 who are unable to present a document listed above:</p> <ol style="list-style-type: none"> <li>10. School record or report card</li> <li>11. Clinic, doctor or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>
	AND	<ol style="list-style-type: none"> <li>1. U.S. social security card issued by the Social Security Administration (<i>other than a card stating it is not valid for employment</i>)</li> <li>2. Certification of Birth Abroad issued by the Department of State (<i>Form FS-545 or Form DS-1350</i>)</li> <li>3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (<i>INS Form I-197</i>)</li> <li>6. ID Card for use of Resident Citizen in the United States (<i>INS Form I-179</i>)</li> <li>7. Unexpired employment authorization document issued by the INS (<i>other than those listed under List A</i>)</li> </ol>

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