Work Study Employment Packet

Enclosed in this packet are the following documents:

- Federal I-9 – Employment Eligibility Verification
- Federal W-4 – Employee Withholding Allowance
- Missouri W-4 – Employee Withholding Allowance

Please ensure that all documents are complete, signed, and dated prior to returning the packet to the Financial Aid Office.

With this packet, you must also present two (2) original forms of identification. **Copies are NOT accepted.** We have provided a short list of the most common forms of identification. A more extensive list is included in the packet.

**PLEASE NOTE: One form MUST be a photo ID.**
- Birth Certificate
- Driver’s License
- Social Security Card
- Passport

Once you have accepted your work study award, you may review job postings online. Visit the Financial Aid website ([www.avila.edu/financialaid](http://www.avila.edu/financialaid)) for more information. A full list of jobs will be posted in July.

If you have any questions regarding this packet or the work study program, please contact the Financial Aid Office at 816.501.3600.
Employment Eligibility Verification
Department of Homeland Security
U.S. Citizenship and Immigration Services

START HERE. 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 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.)

<table>
<thead>
<tr>
<th>Last Name (Family Name)</th>
<th>First Name (Given Name)</th>
<th>Middle Initial</th>
<th>Other Names Used (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (Street Number and Name)</th>
<th>Apt. Number</th>
<th>City or Town</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date of Birth (mm/dd/yyyy) U.S. Social Security Number E-mail Address

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 Registration Number/USCIS Number): ________________________
☐ An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy) _______________. Some aliens may write "N/A" in this field. (See instructions)

For aliens authorized to work, provide your Alien Registration Number/USCIS Number OR Form I-94 Admission Number:

1. Alien Registration Number/USCIS Number: ________________________

OR

2. Form I-94 Admission Number: ________________________

If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

Foreign Passport Number: ________________________
Country of Issuance: ________________________

Some aliens may write "N/A" on the Foreign Passport Number and Country of Issuance fields. (See instructions)

Signature of Employee: ________________________ Date (mm/dd/yyyy): ________________________

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.

Signature of Preparer or Translator: ________________________ Date (mm/dd/yyyy): ________________________

Last Name (Family Name) First Name (Given Name)

Address (Street Number and Name) City or Town State Zip Code

STOP Employer Completes Next Page STOP
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.

<table>
<thead>
<tr>
<th>LIST A</th>
<th>Documents that Establish Both Identity and Employment Authorization</th>
<th>LIST B</th>
<th>Documents that Establish Identity</th>
<th>LIST C</th>
<th>Documents that Establish Employment Authorization</th>
</tr>
</thead>
</table>
| 1. U.S. Passport or U.S. Passport Card | OR | 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. A Social Security Account Number card, unless the card includes one of the following restrictions:
(1) NOT VALID FOR EMPLOYMENT
(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION
(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION |
| 2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551) | | 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) |
| 3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa | | 3. School ID card with a photograph | 3. Certification of Report of Birth issued by the Department of State (Form DS-1350) |
| 4. Employment Authorization Document that contains a photograph (Form I-766) | | 4. Voter's registration card | 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 |
| 5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:
  a. Foreign passport; and
  b. Form I-94 or Form I-94A that has the following:
    (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. | | 5. U.S. Military card or draft record | 5. Native American tribal document |
| 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 | | 6. Military dependent's ID card | 6. U.S. Citizen ID Card (Form I-197) |
| | | 7. U.S. Coast Guard Merchant Mariner Card | 7. Identification Card for Use of Resident Citizen in the United States (Form I-179) |
| | | 9. Driver's license issued by a Canadian government authority | | |
| | | For persons under age 18 who are unable to present a document listed above: | | |
| | | 10. School record or report card | | |
| | | 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).

Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.
Form W-4 (2016)

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 2016 expires February 15, 2017. 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 $1,050 and includes more than $330 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

Personal Allowances Worksheet (Keep for your records)

A. Enter “1” for yourself if no one else can claim you as a dependent.

B. Enter “1” if:
   - You are single and have only one job; or
   - You are married, have only one job, and your spouse does not work; or
   - You wages from a second job or your spouse’s wages (or the total of both) are $1,500 or less.

C. Enter “1” for your spouse. But, you may choose to enter “0-0” if you are married and have either a working spouse or more than one job. Entering “0-0” may help you avoid having too little tax withheld.

D. Enter number of dependents (other than your spouse or yourself) you will claim on your tax return.

E. Enter “1” if you will file as head of household on your tax return (see conditions under Head of household above).

F. Enter “1” if you have at least $2,000 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).

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 $70,000 ($100,000 if married), enter “2” for each eligible child; then less “1” if you have two to four eligible children or less “2” if you have five or more eligible children.
   - If your total income will be between $70,000 and $84,000 ($100,000 and $119,000 if married), enter “1” for each eligible child.

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.)

For accuracy, complete all worksheets that apply.

Employee’s Withholding Allowance Certificate

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.

<table>
<thead>
<tr>
<th>1</th>
<th>Your first name and middle initial</th>
<th>2</th>
<th>Your social security number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Home address (number and street or rural route)</td>
<td>3</td>
<td>Single [ ] Married [ ] Married, but withheld at higher Single rate. Note: If married, but legally separated, or spouse is a nonresident alien, check the &quot;Single&quot; box.</td>
</tr>
<tr>
<td></td>
<td>City or town, state, and ZIP code</td>
<td>4</td>
<td>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. [ ]</td>
</tr>
<tr>
<td></td>
<td>Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Additional amount, if any, you want withheld from each paycheck</td>
<td>6</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>I claim exemption from withholding for 2016, and I certify that I meet both of the following conditions for exemption.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>This year I expect a refund of all federal income tax withheld because I expect to have no tax liability.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>[ ] If you meet both conditions, write &quot;Exempt&quot; here.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 signing to the IRS.) [ ]

9 Office code (optional) [ ]

10 Employer identification number (EIN) [ ]

For Privacy Act and Paperwork Reduction Act Notice, see page 2.
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 2016 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 10% (7.5% if either you or your spouse was born before January 2, 1952) of your income, and miscellaneous deductions. For 2016, you may have to reduce your itemized deductions if your income is over $311,300 and you are married filing jointly or are a qualifying widow(er); $285,350 if you are head of household; $259,400 if you are single and not head of household or a qualifying widow(er); or $155,650 if you are married filing separately. See Pub. 505 for details.

2 Enter:

| $12,600 if married filing jointly or qualifying widow(er) | $ | $ |
| $9,300 if head of household | 2 |
| $6,300 if single or married filing separately | 2 |

3 Subtract line 2 from line 1. If zero or less, enter "-0-"

4 Enter an estimate of your 2016 adjustments to income and any additional standard deduction (see Pub. 505)

5 Add lines 3 and 4 and enter the total. (Include any amount for credits from the Converting Credits to Withholding Allowances for 2016 Form W-4 worksheet in Pub. 505.)

6 Enter an estimate of your 2016 non-wage income (such as dividends or interest)

7 Subtract line 6 from line 5. If zero or less, enter "-0-"

8 Divide the amount on line 7 by $4,050 and enter the result here. Drop any fraction

9 Enter the number from the Personal Allowances Worksheet, line H, page 1

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

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)

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 the wages from the highest paying job are $65,000 or less, do not enter more than "3"

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.

4 Enter the number from line 2 of this worksheet

5 Enter the number from line 1 of this worksheet

6 Subtract line 5 from line 4

7 Find the amount in Table 2 below that applies to the HIGHEST paying job and enter it here

8 Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed

9 Divide line 8 by the number of pay periods remaining in 2016. For example, divide by 25 if you are paid every two weeks and you complete this form on a date in January when there are 25 pay periods remaining in 2016. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck

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(o)(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 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 nondiscrimination 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.
# Missouri Department of Revenue

**Employee's Withholding Allowance Certificate**

This certificate is for income tax withholding and child support enforcement purposes only. Type or print.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Social Security Number</th>
<th>Filing Status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Single ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Home Address (Number and Street or Rural Route)</th>
<th>City or Town</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

1. Allowance For Yourself: Enter 1 for yourself if your filing status is single, married, or head of household ........................................ 1
2. Allowance For Your Spouse: Does your spouse work? ☐ Yes ☐ No If yes, enter 0. If no, enter 1 for your spouse ......... 2
3. Allowance For Dependents: Enter the number of dependents you will claim on your tax return. Do not claim yourself or your spouse or dependents that your spouse has already claimed on his or her Form MO W-4. 3
4. Additional Allowances: You may claim additional allowances if you itemize your deductions or have other state tax deductions or credits that lower your tax. Enter the number of additional allowances you would like to claim. .................. 4
5. Total Number Of Allowances You Are Claiming: Add Lines 1 through 4 and enter total here. .......................... 5
6. Additional Withholding: If you expect to have a balance due (as a result of interest income, dividends, income from a part-time job, etc.) on your tax return, you may request your employer to withhold an additional amount of tax from each pay period. To calculate the amount needed, divide the amount of the expected balance due by the number of pay periods in a year. Enter the additional amount to be withheld each pay period here. ........................................ 6
7. Exempt Status: If you had a right to a refund of all of your Missouri income tax withheld last year because you had no tax liability and this year you expect a refund of all Missouri income tax withheld because you expect to have no tax liability, write “Exempt” on Line 7. See information below. .................. 7
8. If you meet the conditions set forth under the Servicemember Civil Relief Act, as amended by the Military Spouses Residency Relief Act and have no Missouri tax liability, write “Exempt” on line 8. See information below. .................. 8

Under penalties of perjury, I certify that I am entitled to the number of withholding allowances claimed on this certificate, or I am entitled to claim exempt status.

Employee's Signature (Form is not valid unless you sign it)  
Date (MM/DD/YYYY) __/__/____

Employer's Name  
Employer's Address  
City  
State  
Zip Code  
Federal Employer I.D. Number  
Missouri Tax Identification Number

---

Notice To Employer: Within 20 days of hiring a new employee, send a copy of Form MO W-4 to the Missouri Department of Revenue, P.O. Box 3340, Jefferson City, MO 65105-3340 or fax to (573) 526-8079.

---

**Employee Information — You Do Not Pay Missouri Income Tax on all of the Income You Earn!**


Form MO W-4 is completed so you can have as much “take-home pay” as possible without an income tax liability due to the state of Missouri when you file your return. Deductions and exemptions reduce the amount of your taxable income. If your income is less than the total of your personal exemption plus your standard deduction, you should mark “Exempt” on Line 7 above. The following amounts of your annual Missouri adjusted gross income will not be taxed by the state of Missouri when you file your individual income tax return.

<table>
<thead>
<tr>
<th>Single</th>
<th>Married Filing Combined</th>
<th>Head of Household</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,100 — personal exemption</td>
<td>$4,200 — personal exemption</td>
<td>$3,500 — personal exemption</td>
</tr>
<tr>
<td>$6,500 — standard deduction</td>
<td>$12,600 — standard deduction</td>
<td>$9,300 — standard deduction</td>
</tr>
<tr>
<td>$8,400 — Total</td>
<td>$16,800 — Combined Total (For both spouses)</td>
<td>$12,800 — Total</td>
</tr>
<tr>
<td>+ $1,200 for each dependent</td>
<td>+ $1,200 for each dependent</td>
<td>+ $1,200 for each dependent</td>
</tr>
<tr>
<td>+ up to $5,000 for federal tax</td>
<td>+ up to $10,000 for federal tax</td>
<td>+ up to $5,000 for federal tax</td>
</tr>
</tbody>
</table>

---

**Items to Remember:**

- If your filing status is married filing combined and your spouse works, do not claim an exemption on Form MO W-4 for your spouse.
- If you and your spouse have dependents, please be sure only one of you claim the dependents on your Form MO W-4. If both spouses claim the dependents as an allowance on Form MO W-4, it may cause you to owe additional Missouri income tax when you file your return.
- If you have more than one employer, you should claim a smaller number or no allowances on each Form MO W-4 filed with employers other than your principal employer so the amount withheld will be closer to your amount of total tax.

- If you itemize your deductions, instead of using the standard deduction, the amount not taxed by Missouri may be a greater or lesser amount.
- If you are claiming an “Exempt” status due to the Military Spouses Residency Relief Act you must provide one of the following to your employer: Leave and Earnings Statement of the non-resident military servicemember, Form W-2 issued to the nonresident military servicemember, a military identification card, or specific military orders received by the servicemember. You must also provide verification of residency such as a copy of your state income tax return filed in your state of residence, a property tax receipt from the state of residence, a current drivers license, vehicle registration or voter ID card.

---

**Mail to:** Taxation Division  
P.O. Box 3340  
Jefferson City, MO 65105-3340

**Phone:** (573) 751-8750  
**Fax:** (573) 526-8079