



FAXED

SENSITIVE BUT UNCLASSIFIED

Department of Homeland Security
E-Verify

Report Prepared: 07/14/2010
Page: 1 of 1

Case Verification Number: 2010195141450WP

Initial Verification:

Last Name:	Lara Cruz	First Name:	Jose
Middle Initial:	M	Maiden Name:	
Social Security Number:	*** ** 0517	Date of Birth:	08/26/1993
Hire Date:	07/14/2010	Citizenship Status:	An alien authorized to work
Alien Number:	087446980	I-94 Number:	
Card Number:	EAC0923350693		
Document Type:	Employment Authorization Document (Form I-766)	Doc. Expiration Date:	07/30/2013
Submitted By:	ESAG6409	Submitted On:	07/14/2010

Initial Verification Results:

Last Name:	LARA CRUZ	First Name:	JOSE
		Expire Date:	07/30/2013

Initial Eligibility: Employment Authorized

SSA Referral:

Referral By:	Referral Date:
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Verification Response:

Eligibility:	Response Date:
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SSA Resubmittal:

Last Name:	First Name:
Middle Initial:	Maiden Name:
Social Security Number:	Date of Birth:
Submitted By:	Submitted On:

Resubmittal Verification Results:

Eligibility:

Additional Verification:

Comments:	
Submitted By:	Submitted On:

Verification Response:

Eligibility:	Response Date:
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DHS Referral:

Referral By:	Referral Date:
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DHS Referral Results:

Eligibility:	Response Date:
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U.S. DEPARTMENT OF HOMELAND SECURITY, U. S. Citizenship and Immigration Services

EMPLOYMENT AUTHORIZATION CARD

The person identified is authorized to work in the U.S. for the validity of this card.

NAME LARA CRUZ, JOSE M

Jose Manuel Lara Cruz



A# 087-446-980

CARD # EAC0923350693

Birthdate 08/20/1980 Category Sex

Country Mexico Terms of Conditions M

Notice

fingerprint
not
available

NOT VALID FOR REENTRY TO U.S.

CARD VALID FROM 12/03/09 EXPIRES 07/30/13



Addendum to Application

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-4 DATE 7-9-10

Name Lara Cruz Manuel Jose
Last First Middle Maiden 2315 Park Lane

Social Security No. 470-55-0517

Telephone 607-529-9012

If under 18, please list age 1' Referred by Patricia Cruz Santos

Position applied for (1) Open Days/hours available to work
 and salary desired (2) _____
 (Be specific) No Pref Thur _____
Mon _____ Fri _____
Tue _____ Sat _____
Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights? NO

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

When available for work? any time

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
 No Yes If so, please explain _____

Do you anticipate any absences from work on a regular basis?
 No Yes If so, please explain _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	<u>Mayo High School</u>		<u>3</u>	
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

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. _____