

IDENTITY VERIFICATION –LAW ENFORCEMENT OFFICE

K-FRD 102 (4-21)

Information collected on this form is for identification of a claimant for unemployment compensation benefits. Once completed this form is confidential pursuant to K.S.A. 44-714(e) and K.A.R. 50-4-2. Unauthorized disclosure of the completed form may result in civil and criminal penalties.

Section A (completed by **claimant** applying for unemployment compensation benefits):

Name: _____ Social Security number: _____

Address: _____ City: _____ State: _____ ZIP _____

Date of Birth: _____ Phone: _____ Email: _____

Section B (completed by **Law Enforcement Officer** of a Kansas law enforcement agency that has jurisdiction over the location of the claimant's residence or last known place of employment in Kansas, or if all Kansas law enforcement agencies having jurisdiction over those locations have declined to participate, then by a participating law enforcement agency and the Secretary of Labor approves such submission from such law enforcement agency):

I, _____, attest that the individual identified above provided me with the following forms of identification and have checked the boxes for each. NOTE: An individual must provide **one or two** of the forms below based on the federal [Form I-9 requirements](#) (See page 3); all documents must be unexpired:

- Driver's license or identification card issued by a state or outlying territory of the U.S., provided it contains a photograph or information including information such as name, address, date of birth, gender, height and eye color.
- I.D. card issued by federal, state or local government agencies or entities, provided it contains a photograph or information including information such as name, address, date of birth, gender, height and eye color.
- School I.D. with photograph U.S. Military or draft record U.S. Passport or U.S. Passport Card
- Voter registration card Military dependent's I.D. card Permanent Resident card
- Native American Tribal document U.S. Coast Guard Merchant Mariner Document (MMD) card
- Driver's license issued by a Canadian government authority

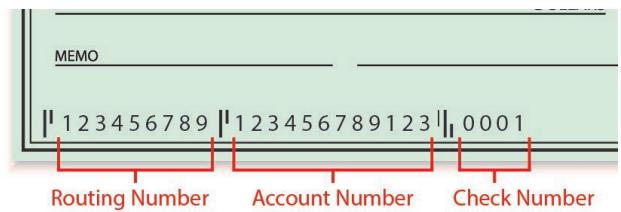
Acceptable documents for individuals **under the age of 18** who are unable to present a document listed above:

- School record or report card Clinic, doctor or hospital record Day care or nursery school record

For minors under the age of 18 and certain individuals with disabilities who are unable to produce any of the listed identity documents, special notations may be used in place of a List B document of the I-9 form. A complete list of acceptable documentation can be found at: <https://www.uscis.gov/i-9-central/form-i-9-acceptable-documents>

Section C - Benefit Payment Information

- Debit Card sent to the above address
- Direct Deposit
Bank Routing no. _____
Acct. no. _____



Claimant Certification: I certify that the information I have provided is correct and complete, and I understand the willful or intentional misrepresentation or failure to disclose a material fact is punishable under the Kansas Employment Security Law and any other penalties available under state and federal law.

Printed name: _____ Signature: _____ Date: _____

LEO Certification:

Printed name: _____ Title _____

Signature: _____ Date: _____

Phone Number: _____ Email: _____

ORI Number: _____ Law Enforcement Agency Name: _____