

Dear Substitute Applicant,

Thank you for your inquiry regarding substituting at the Cape Cod Lighthouse Charter School.

Enclosed in this packet are the following:

- 1. Application
- 2. Reference and W-4 forms
- 3. Criminal Offender Record Information (CORI)
- 4. Fingerprint Form
- 5. Reference Form

Please send your reference form to the person listed on the reference form in your application. Please send the form to someone familiar with your work with children.

We anticipate that during the school year we will need substitute teachers on occasion. Assuming your references and application in order, we will call you when we a need a substitute teacher with your qualifications. We often do not know in advance when we will need a substitute, sometimes you will be called on at the last minute. Employment as a substitute will be intermittent.

Sincerely,

Paul Niles Executive Director



# Application for Substitute Teacher

Demographics						
Last Name:	First Name:			Middle Name:		
Mailing Address:						
Home Phone:		Cell Phone:				
Email:						
Educational Background						
High School:						
College:	Degree:		Maj	ior:		
Graduate:	Degree:		Major:			
Area of Certification (if any):	Area of Certification (if any):					
Employment Background for the La	st Three Years					
Place of Employment:	Dates of Employn	nent:	Pos	ition:		
Place of Employment:	Dates of Employn	ates of Employment: Po		ition:		
Place of Employment:	Dates of Employn	nent:	Pos	ition:		

## Please check off grades and curriculum areas in which you would prefer to teach:

Grades:	Curriculum Areas:	
Sixth	Art	Physical Education
Seventh	English/Language	Science
Eighth	Arts	Social Studies
All	Health	Technology
	Math	Physical Education



## Candidate Reference Form

. To be completed by candidate:				
Candidate's Name:				
Position Sought:				
Reference Name:				
Reference Address:				

The Family Rights & Protection Act of 1972 provides that this reference, once received by the Cape Cod Lighthouse Charter School, cannot be released to any outside without express written consent of the candidate. The Act also provides that the candidate has a right to view this reference unless the candidate waives that right.

If you wish to waive this right, please indicate your decision by signing below:

Candidate's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## II. To be completed by your reference:

The above names candidate has applied for a substitute position at our school and has given your name as a reference. We would appreciate your appraisal of this candidate and ask that you answer the questions below. Thank you.

- 1. In what capacity have you have known the candidate and for how long?
- 2. Would you employ applicant in a similar position? If not, why?
- 3. Describe skills that you believe this candidate has that would support effective teaching.
- 4. Is this candidate a reliable and responsible person?
- 5. Describe skills that the candidate has in relating to children, especially middle-school age.



## **Fingerprinting Information**

On January 10, 2013, Governor Patrick signed into law H. 4307, *An act relative to background checks*. <u>http://www.malegislature.gov/Laws/SessionLaws/Acts/2012/Chapter459</u> This law expands what public, private, and parochial schools, including approved private special education schools and child care facilities, already do in conducting state CORI checks on all employees at least once every three years. It creates a national criminal database check for all school employees and contractor employees. All newly hired school employees, including educators, maintenance staff, cafeteria workers, bus drivers, and employees of contractors who work in the schools and may have direct and unmonitored contact with children are currently required to complete the national background check.

Volunteers at schools will continue to be required to submit to state CORI checks at least once every three years, as currently required by statute, but will not be required to submit fingerprints for the national checks.

For all current K-12 school employees and early educators, the law directs the Board of Early Education and Care and the Board of Elementary and Secondary Education to adopt regulations that phase in national background checks over three years.

Individuals will pay a fee to comply with this requirement that ranges from up to \$35 for non-licensed employees to up to \$55 for license-holders.

We wish we could offer some incentive for complying with this request. But regrettably we cannot. It is a law. We all must comply to maintain employment in a school setting.

Directions to get your fingerprinting done:

- 1. You must register for an appointment. For more information, please check the IdentoGO registration website at <a href="https://ma.ibtfingerprint.com/">https://ma.ibtfingerprint.com/</a> or call **1-866-349-8130**.
- 2. You must give them our school ID number, which is 0432000.
- 3. You must keep the appointment by going to the location selected during your registration; or rescheduling within 2 weeks so not to lose your fee.
- 4. Lastly, you must save your receipt as proof to present to the school office in case results are not returned for some unforeseen reason. Normally results are received within 48 hours.

Thank you for your anticipated cooperation.



# Cape Cod Lighthouse Charter School CORI Information

Volunteers are an integral part of the CCLCS program, so much so that to measure the contributions made to this school by our volunteers is impossible. We depend on and welcome your participation, but to address Federal regulations, we are required to request background checks on volunteers who have "direct and unmonitored contact with children."

If you choose to participate in volunteer projects involving students in which there is a reasonable possibility you could be alone with a student without a member of staff present, we will need to have a CORI form clearance on file. Examples of such volunteer assignments: 6<sup>th</sup> grade visits, field trip chaperone, coaching, recreation class driver, after school clubs, seminars, or tutoring.

If you choose to fill out the form and return to the office, we will submit them as they are received. If you choose to wait and submit the form once you have been asked to volunteer, we will the verification process at the time. The CORI is good for 3 years, so one form will cover your entire CCLCS career for one child. The results of CORI checks are maintained in a secure location within the school and only CORI authorized staff access to the documents.

You can obtain a copy of your own CORI at no cost by submitting a person request to Criminal History Systems Board, 200 Arlington Street, Chelsea, MA 02150, or online at <u>https://www.mass.gov/criminal-record-check-services</u>.

We look for forward to your participation in our program. In fact, we couldn't go on without it!



THE COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY Department of Criminal Justice Information Services 200 Arlington Street, Suite 2200, Chelsea, MA 02150 TEL: 617-660-4640 | TTY: 617-660-4606 | FAX: 617-660-5973 MASS.GOV/CJIS



## This form is not to be faxed. Please return form to organization. Criminal Offender Record Information (CORI) Acknowledgement Form

To be used by organizations conducting CORI checks for employment or licensing purposes.

is registered under the

may conduct

(Organization) provisions of M.G.L. c.6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, or current licensees.

As a prospective or current employee, subcontractor, volunteer, license applicant or current licensee, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to

(Organization) to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing

(Organization)

with written notice of my intent to withdraw consent to a CORI check.

I also understand, that \_\_\_\_\_

(Organization)

subsequent CORI checks within one year of the date this Form was signed by me.

By signing below, I provide my consent to a CORI check and affirm that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

Signature of CORI Subject

Date



THE COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY Department of Criminal Justice Information Services

200 Arlington Street, Suite 2200, Chelsea, MA 02150 TEL: 617-660-4640 | TTY: 617-660-4606 | FAX: 617-660-5973 MASS.GOV/CJIS



### SUBJECT INFORMATION

Please complete this section using the information of the person whose CORI you are requesting. The fields marked with an asterisk (\*) are required fields.

* First Name:	Middle Initial:
* Last Name:	Suffix (Jr., Sr., etc.):
Former Last Name 1:	
Former Last Name 2:	
Former Last Name 3:	
Former Last Name 4:	
* Date of Birth (MM/DD/YYYY): Place of Birth: _	
* Last <b>SIX</b> digits of Social Security Number:	□ No Social Security Number
Sex: In. Eye Color: ft in. Eye Color:	Race:
Driver's License or ID Number:	State of Issue:
Father's Full Name:	
Mother's Full Name:	
Current Address	
* Street Address:	
Apt. # or Suite: *City:	*State: *Zip:
SUBJECT VERIFICATION	

The above information was verified by reviewing the following form(s) of government-issued identification:

Verified by:

Print Name of Verifying Employee

Signature of Verifying Employee

Date

# 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 find out if you should adjust your withholding on Form W-4 or W-4P.

**Nonresident alien.** If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

## **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 children 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

------ Separate here and give Form W-4 to your employer. Keep the worksheet(s) for your records.

	w-4 hent of the Treasury Revenue Service	Whether you're entit	e's Withholding ed to claim a certain numbe e IRS. Your employer may b	r of allowances or exem	ption from with	holding is	
1	Your first name a	and middle initial	Last name			2 You	r social security number
	Home address (r	number and street or rural route)		3 Single Mar		,	vithhold at higher Single rate. withhold at higher Single rate."
	City or town, stat	te, and ZIP code		-			your social security card, r a replacement card.
5	Total number	of allowances you're claim	ning (from the applicable	worksheet on the foll	owing pages	s)	. 5
6	Additional am	nount, if any, you want with	held from each paychec	k			. 6\$
7	<ul> <li>Last year I f</li> <li>This year I e</li> </ul>	otion from withholding for 2 nad a right to a refund of <b>al</b> expect a refund of <b>all</b> feder oth conditions, write "Exen	I federal income tax with al income tax withbeld be	held because I had <b>n</b> ecause I expect to ha	o tax liability, ve no tax liab	and	emption.
Under	penalties of per	jury, I declare that I have exa	amined this certificate and	, to the best of my kno	wledge and be	elief, it is t	true, correct, and complete.
	oyee's signature orm is not valid	e unless you sign it.) ►				Date ►	
		d address ( <b>Employer:</b> Complete sending to State Directory of Ne		IRS and complete	9 First date of employment		10 Employer identification number (EIN)

your wages and other income, including income earned by a spouse, during the year.

Line G. Other credits. You might be able to reduce the tax withheld from your paycheck if you expect to claim other tax credits, such as the earned income tax credit and tax credits for education and child care expenses. If you do so, your paycheck will be larger but the amount of any refund that you receive when you file your tax return will be smaller. Follow the instructions for Worksheet 1-6 in Pub. 505 if you want to reduce your withholding to take these credits into account.

# Deductions, Adjustments, and Additional Income Worksheet

Complete this worksheet to determine if you're able to reduce the tax withheld from your paycheck to account for your itemized deductions and other adjustments to income such as IRA contributions. If you do so, your refund at the end of the year will be smaller, but your paycheck will be larger. You're not required to complete this worksheet or reduce your withholding if you don't wish to do so.

You can also use this worksheet to figure out how much to increase the tax withheld from your paycheck if you have a large amount of nonwage income, such as interest or dividends.

Another option is to take these items into account and make your withholding more accurate by using the calculator at *www.irs.gov/W4App*. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

#### Two-Earners/Multiple Jobs Worksheet

Complete this worksheet if you have more

than one job at a time or are married filing jointly and have a working spouse. If you don't complete this worksheet, you might have too little tax withheld. If so, you will owe tax when you file your tax return and might be subject to a penalty.

Figure the total number of allowances you're entitled to claim and any additional amount of tax to withhold on all jobs using worksheets from only one Form W-4. Claim all allowances on the W-4 that you or your spouse file for the highest paying job in your family and claim zero allowances on Forms W-4 filed for all other jobs. For example, if you earn \$60,000 per year and your spouse earns \$20,000, you should complete the worksheets to determine what to enter on lines 5 and 6 of your Form W-4, and your spouse should enter zero ("-0-") on lines 5 and 6 of his or her Form W-4. See Pub. 505 for details.

Another option is to use the calculator at *www.irs.gov/W4App* to make your withholding more accurate.

**Tip:** If you have a working spouse and your incomes are similar, you can check the "Married, but withhold at higher Single rate" box instead of using this worksheet. If you choose this option, then each spouse should fill out the Personal Allowances Worksheet and check the "Married, but withhold at higher Single rate" box on Form W-4, but only one spouse should claim any allowances for credits or fill out the Deductions, Adjustments, and Additional Income Worksheet.

## Instructions for Employer

Employees, do not complete box 8, 9, or 10. Your employer will complete these boxes if necessary.

New hire reporting. Employers are

required by law to report new employees to a designated State Directory of New Hires. Employers may use Form W-4, boxes 8, 9, and 10 to comply with the new hire reporting requirement for a newly hired employee. A newly hired employee is an employee who hasn't previously been employed by the employer, or who was previously employed by the employer but has been separated from such prior employment for at least 60 consecutive days. Employers should contact the appropriate State Directory of New Hires to find out how to submit a copy of the completed Form W-4. For information and links to each designated State Directory of New Hires (including for U.S. territories), go to www.acf.hhs.gov/programs/css/ employers.

If an employer is sending a copy of Form W-4 to a designated State Directory of New Hires to comply with the new hire reporting requirement for a newly hired employee, complete boxes 8, 9, and 10 as follows.

**Box 8.** Enter the employer's name and address. If the employer is sending a copy of this form to a State Directory of New Hires, enter the address where child support agencies should send income withholding orders.

**Box 9.** If the employer is sending a copy of this form to a State Directory of New Hires, enter the employee's first date of employment, which is the date services for payment were first performed by the employee. If the employer rehired the employee after the employee had been separated from the employer's service for at least 60 days, enter the rehire date. **Box 10.** Enter the employer's employer

identification number (EIN).

Form	W-4	(201	8)
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		Personal Allowances Worksheet (Keep for your records.)		_
Α	Enter "1" for your		Α	_
В	Enter "1" if you w	ill file as married filing jointly	В	_
C	Enter "1" if you w	ill file as head of household	C	_
	(•)	You're single, or married filing separately, and have only one job; or		
D	Enter "1" if: { • `	You're married filing jointly, have only one job, and your spouse doesn't work; or	D	_
	(• <sup>·</sup>	Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less.		
E	Child tax credit.	See Pub. 972, Child Tax Credit, for more information.		
		ome will be less than \$69,801 (\$101,401 if married filing jointly), enter "4" for each eligible child.		
		ome will be from \$69,801 to \$175,550 (\$101,401 to \$339,000 if married filing jointly), enter "2" for each		
	eligible child.			
	<ul> <li>If your total inclusion each eligible child</li> </ul>	come will be from \$175,551 to \$200,000 (\$339,001 to \$400,000 if married filing jointly), enter "1" for		
	-	 ome will be higher than \$200,000 (\$400,000 if married filing jointly), enter "-0-"	Е	
F	Credit for other	dependents.		-
	<ul> <li>If your total inco</li> </ul>	ome will be less than \$69,801 (\$101,401 if married filing jointly), enter "1" for each eligible dependent.		
	<ul> <li>If your total inco</li> </ul>	ome will be from \$69,801 to \$175,550 (\$101,401 to \$339,000 if married filing jointly), enter "1" for every		
	two dependents	(for example, "-0-" for one dependent, "1" if you have two or three dependents, and "2" if you have		
	four dependents)			
	•	ome will be higher than \$175,550 (\$339,000 if married filing jointly), enter "-0-"	F	_
G		you have other credits, see Worksheet 1-6 of Pub. 505 and enter the amount from that worksheet here	G	_
н	Add lines A throu	gh G and enter the total here $\ldots$	н	_
	For accuracy,	• If you plan to <b>itemize</b> or <b>claim adjustments to income</b> and want to reduce your withholding, or if you have a large amount of nonwage income and want to increase your withholding, see the <b>Deductions</b> , <b>Adjustments, and Additional Income Worksheet</b> below.		
	complete all worksheets that apply.	• If you have more than one job at a time or are married filing jointly and you and your spouse both work, and the combined earnings from all jobs exceed \$52,000 (\$24,000 if married filing jointly), see the <b>Two-Earners/Multiple Jobs Worksheet</b> on page 4 to avoid having too little tax withheld.		
	l	• If <b>neither</b> of the above situations applies, <b>stop here</b> and enter the number from line H on line 5 of Form W-4 above.		
		Deductions, Adjustments, and Additional Income Worksheet		
Note	e: Use this workshe income.	et only if you plan to itemize deductions, claim certain adjustments to income, or have a large amount of	of nonwage	
1	Enter an estimat	e of your 2018 itemized deductions. These include qualifying home mortgage interest,		
	charitable contrib	putions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of		
	,	Pub. 505 for details ....................................		_
		00 if you're married filing jointly or qualifying widow(er)		
2		00 if you're head of household		_
		00 if you're single or married filing separately		
3		om line 1. If zero or less, enter "-0-"		_
4		e of your 2018 adjustments to income and any additional standard deduction for age or ub. 505 for information about these items).		
		· · · · · · · · · · · · · · · · · · ·		_
5		and enter the total		-
6		e of your 2018 nonwage income (such as dividends or interest)		-
8		orn line 5. If zero, enter $-0^2$ . If less than zero, enter the amount in parentneses $1^2$ , $1^2$ , $1^2$ and $1^2$		-
	Drop any fraction			_
9	Enter the number	from the Personal Allowances Worksheet, line H above	. <u></u>	_
10	Multiple Jobs W	9 and enter the total here. If zero or less, enter "-0-". If you plan to use the <b>Two-Earners</b> / orksheet, also enter this total on line 1, page 4. Otherwise, <b>stop here</b> and enter this total		
1	on Form W-4, line	e 5, page 1		

Page **3** 

Form W	-4 (2018)		Page
	Two-Earners/Multiple Jobs Worksheet		
Note	: Use this worksheet only if the instructions under line H from the Personal Allowances Worksheet direct you h	nere.	
1	Enter the number from the <b>Personal Allowances Worksheet</b> , line H, page 3 (or, if you used the <b>Deductions, Adjustments, and Additional Income Worksheet</b> on page 3, the number from line 10 of that worksheet)	1	
2	Find the number in <b>Table 1</b> below that applies to the <b>LOWEST</b> paying job and enter it here. <b>However,</b> if you're married filing jointly and wages from the highest paying job are \$75,000 or less and the combined wages for you and your spouse are \$107,000 or less, don't enter more than "3".	2	
3	If line 1 is <b>more than or equal to</b> 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. <b>Do not</b> use the rest of this worksheet	3	
Note	: If line 1 is <b>less than</b> line 2, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.		
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	6	
7	Find the amount in Table 2 below that applies to the HIGHEST paying job and enter it here	7 \$	
8	Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed	8 <u></u>	
9	Divide line 8 by the number of pay periods remaining in 2018. For example, divide by 18 if you're paid every		
	O supplies and successful to the former and a data in the Annih sub-on-these and to make a minimum interview in		

2 weeks and you complete this form on a date in late April when there are 18 pay periods remaining in 2018. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld 

Table 1			Table 2				
Married Filing	Jointly	All Other	ſS	Married Filing Jointly		All Others	
If wages from <b>LOWEST</b> paying job are—	Enter on line 2 above	If wages from <b>LOWEST</b> paying job are—	Enter on line 2 above	If wages from <b>HIGHEST</b> paying job are—	Enter on line 7 above	If wages from <b>HIGHEST</b> paying job are—	Enter on line 7 above
\$0 - \$5,000 5,001 - 9,500 9,501 - 19,000 19,001 - 26,500 26,501 - 37,000 37,001 - 43,500 43,501 - 55,000 60,001 - 70,000 70,001 - 75,000 75,001 - 85,000 85,001 - 95,000 130,001 - 150,000 130,001 - 160,000 160,001 - 170,000 180,001 - 180,000 180,001 - 190,000 190,001 - 200,000 200,001 and over	0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	\$0 - \$7,000 7,001 - 12,500 12,501 - 24,500 31,501 - 31,500 39,001 - 55,000 55,001 - 70,000 70,001 - 85,000 85,001 - 90,000 90,001 - 105,000 105,001 - 115,000 115,001 - 120,000 130,001 - 145,000 145,001 - 155,000 155,001 - 185,000 185,001 and over	0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	\$0 - \$24,375 24,376 - 82,725 82,726 - 170,325 170,326 - 320,325 320,326 - 405,325 405,326 - 605,325 605,326 and over	\$420 500 910 1,000 1,330 1,450 1,540	\$0 - \$7,000 7,001 - 36,175 36,176 - 79,975 79,976 - 154,975 154,976 - 197,475 197,476 - 497,475 497,476 and over	\$420 500 910 1,000 1,330 1,450 1,540

**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(f)(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 cities, 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 nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You aren't required to provide the information requested on a form that's 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.

9 \$

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.