



# **Corporate Immigration Compliance Plans, Policies, and Procedures**

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**Compiled by Mdivani Corporate Immigration Law Firm**

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# Employer Immigration Compliance Plans, Policies and Procedures 4th Edition

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ISBN: 978-0-9774524-8-4

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Information provided in this publication is of a general nature: it is not specific legal advice, and reading it does not create an attorney-client relationship. This information may be inapplicable to your specific circumstances. Immigration law is complex and frequently changes. Information in this book may be outdated if policy or law change by the time you are ready to act on your compliance needs. I strongly suggest that you have a business immigration attorney with expertise in employer compliance, review your plan of action and advise you on the specifics of your immigration compliance before you act.

**VERTEX PRESS**  
**CORPORATE IMMIGRATION COMPLIANCE INSTITUTE**  
U.S. Business Immigration Law Library Kansas City, MO





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# 1

□ **Corporate Immigration  
Compliance Policy**

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Checklist**

# Corporate Immigration Compliance Policy

## ▪ WHAT IS THIS?

This is a sample Employer Immigration Compliance Policy that is based on ICE Best Employment Practices. It points out that while the employer complies with immigration law requirements, at the same time the employer complies with law and its policies/procedures regarding non-discrimination and creating and maintaining an inclusive workforce. The Policy is followed by an annual revision schedule.

## ▪ HOW TO USE THIS

Review the policy. Decide if it is a good fit for your company, and either adopt it as drafted or change as appropriate. Use the Revision Schedule to ensure the Policy is revised at least once a year or as often as important changes in the law or policy occur. Conduct training.

## NOTES:

# Corporate Immigration Compliance Policy

\_\_\_\_\_ is committed to complying with immigration law.

COMPANY NAME

We are dedicated to ensuring compliance with immigration law in the hiring, retention, and termination of our employees. We are equally committed to having an inclusive workforce, based on non-discriminatory policies and following federal and state laws prohibiting discrimination based on race, nationality, alienage, ethnicity and religion. In furtherance of our Immigration Compliance Policy, we have implemented a comprehensive Immigration Compliance plan with procedures, which are subject to annual revisions. Even though we are not an ICE-IMAGE participant, we were guided by ICE's Best Hiring Practices in establishing our policy. It is our policy to hire and employ only employment-authorized individuals. We designate and properly train Authorized Personnel on how to handle employee and contractor immigration compliance matters. We conduct recurrent audits of I-9s. We have established that employees should report to trained Authorized Personnel if they have a question or issue that needs to be investigated relating to immigration compliance or unlawful discrimination, and a protocol for responding to such reports.

ESTABLISHED \_\_\_\_\_

NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

# Corporate Immigration Compliance Policy and Procedures

## ANNUAL REVISION SCHEDULE

Employer Immigration Compliance Policy and Procedures should be revised annually to ensure that it reflects changes in immigration law and policy, which may be applicable to this business at that time.

### Policies and Procedures Established

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

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20\_\_ Revision Scheduled for \_\_\_\_\_, 20\_\_  
DATE

Reviewed \_\_\_\_\_, 20\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

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20\_\_ Revision Scheduled for \_\_\_\_\_, 20\_\_  
DATE

Reviewed \_\_\_\_\_, 20\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

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20\_\_ Revision Scheduled for \_\_\_\_\_, 20\_\_

DATE

Reviewed \_\_\_\_\_, 20\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

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20\_\_ Revision Scheduled for \_\_\_\_\_, 20\_\_

DATE

Reviewed \_\_\_\_\_, 20\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

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DATE

Reviewed \_\_\_\_\_, 20\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

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20\_\_ Revision Scheduled for \_\_\_\_\_, 20\_\_

DATE

Reviewed \_\_\_\_\_, 20\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

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# ICE Best Employment Practices

## ■ WHAT IS THIS?

ICE Best Employment Practices were developed by Immigration and Customs Enforcement as part of the IMAGE Employer Certification program. ICE Best Employment Practices are viewed by the government as one of the "carefully crafted compliance tools," and are routinely included in settlement agreements between employers and ICE. ICE uses these guidelines in assessing whether employers comply with requirements of Immigration Reform and Control Act ("IRCA") applicable to businesses.

## ■ HOW TO USE THIS

Employers should carefully review ICE Best Practices with their business immigration counsel, adopt those that are reasonable, modify those that are IMAGE-program specific, and use ICE Best Practices as a foundation for the Immigration Compliance Plan, Policies and Procedures to comply with IRCA based on this guidance from the enforcement agency.

## NOTES:

# ICE BEST EMPLOYMENT PRACTICES

## NOTE:

These are the Best Employment Practices recommended by US Immigrations and Customs Enforcement (ICE).

## 12 Best Hiring Practices

1. Use E-Verify, the OHS employment eligibility verification program, to verify the employment eligibility of all new hires.
2. Use the Social Security Number Verification Service (SSNVS) and make a good faith effort to correct and verify the names and Social Security numbers of the current workforce.
3. Establish a written hiring and employment eligibility verification policy.
4. Establish an internal compliance and training program related to the hiring and employment verification process, including completion of Form I-9, how to detect fraudulent use of documents in the verification process, and how to use E-Verify and SSNVS.
5. Require the Form I-9 and E-Verify process to be conducted only by individuals who have received appropriate training and include a secondary review as part of each employee's verification to minimize the potential for a single individual to subvert the process.
6. Arrange for annual Form I-9 audits by an external auditing firm or a trained employee not otherwise involved in the Form I-9 process.
7. Establish a procedure to report to ~~ICE~~ <sup>management</sup> credible information of suspected criminal misconduct in the employment eligibility verification process.
8. Establish a program to assess subcontractors' compliance with employment eligibility verification requirements. Encourage contractors to incorporate IMAGE Best Practices and when practicable incorporate the verification requirements in subcontractor agreements.
9. Establish a protocol for responding to letters received from federal and state government agencies indicating that there is a discrepancy between the agency's information and the information provided by the employer or employee (for example, "no match" letters received from the Social Security Administration).
10. Establish a ~~tip~~ <sup>open-door policy</sup> line mechanism (inbox, e-mail, etc.) for employees to report activity relating to the employment of unauthorized workers, and a protocol for responding to employee tips.
11. Establish and maintain appropriate policies, practices and safeguards against use of the verification process for unlawful discrimination, and to ensure that U.S. citizens and authorized workers do not face discrimination with respect to hiring, firing, or recruitment or referral for a fee because of citizenship status or national origin.
12. Maintain copies of any documents accepted as proof of identity and/or employment authorization for all new hires.

# Business Immigration Checklist

## ▪ WHAT IS THIS?

The Business Immigration Checklist is a tool to promptly assess the state of an employer's immigration compliance.

## ▪ HOW TO USE THIS

Ask executive and management of the company questions on the checklist. If the employer can check off all the items on the checklist, the employer is likely in substantial IRCA compliance. If some items cannot be checked off, it is time to adopt and implement a specific employer immigration compliance plan, policies, and procedures based on ICE Best Employment Practices.

## NOTES:

# MDIVANI BUSINESS IMMIGRATION COMPLIANCE CHECKLIST

## I. Does Employer Understand Consequences of Immigration Non-Compliance?

**Criminal:** By DHS, DOL & DOJ: IRCA & RICO arrests, jail terms, fines, assets forfeiture: Agriprocessors, Asplundh Tree

**Civil Sanctions:** by DHS under IRCA

**IRCA Discrimination:** Backpay, fines, DOJ reporting requirements

**Under State Law:** Loss of business license, loss of state credits

## II. Immigration Compliance Officer: Who Is In Charge?

## III. Written Corporate Immigration Compliance Policies, Procedures, and Plan: Use ICE Best Employment Practices

- Corporate Immigration Compliance and Non-Discrimination **Policy**
- E-Verify**
- Annual **I-9 Training** Procedures and Schedule
- Designated **I-9 Administrators**
- Annual **I-9 Audits** Procedures and Schedule
- SSN and DHS **No-Match** Letters Procedures
- Contractor** Immigration Compliance Procedures
- Work Visa** Procedures
- Government Audit** Procedures

## IV. Mergers & Acquisitions

New **Visas** for Acquired Employees? Liability for **Incoming I-9s**?

# 2

- **I-9 Checklist**

- **Electronic I-9**

**Policy/Procedures**

- **Virtual I-9**

**Policy/Procedure**

# I-9 CHECKLIST

Check as applicable

Remove/Draw a straight line through inapplicable items

- Ask the employee to complete Part 1 of the I-9 form on the first day of work. Please make sure he (she) signs and dates Part 1, and make sure Section 1 makes sense.
- Show list of acceptable documents to the new employee, ask him/her to provide either one (1) document from List A or one (1) document from List B and one(l) document from List C within three (3) days.
- Inspect and record documents presented by employee in Section 2; copy front and back.
- Follow E-Verify procedures and print result.
- Have a second Authorized Employee review the I-9 and E-Verify printout.
- If employment authorization needs to be re-verified, enter the employee's name, date of expiration and date of warning notification into the Re-verification Table and Outlook Calendar.
- Scan all documents into the I-9 computer file.
- Store the original I-9 and copies of presented documents and E-Verify printout in the I-9 Records Binder.

**PLEASE REMEMBER:**

This list is for Employees only not for contractors, subcontractors, or vendors.

# Electronic I-9 Policy

This is a sample, please work with your corporate immigration counsel and IT to modify and adopt a policy specifically applicable to your business operations.

**COMPANY NAME**

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## 8 CFR 274a.2

	Government requirement	How we meet the requirement
<b>Standards for Retention: Rule (e)(i)</b>	Reasonable controls to ensure the integrity, accuracy and reliability of the electronic generation or storage system.	<p>All Forms I-9 are created and completed by the employee and I-9 Administrator on physical paper forms and/or using the digital completion method available at <a href="http://www.uscis.gov">www.uscis.gov</a>.</p> <p>___COMPANY___ does not use third-party software or services to electronically generate any Form I-9.</p> <p style="text-align: center;">-----</p> <p><b>Chief Information Officer</b> certifies in Attachment 2 that ___COMPANY___ does the following:</p> <ul style="list-style-type: none"> <li>- Protect against authorized access through hardware, software, and services</li> <li>- Provide data backup and redundancy through multiple instances of archive services</li> <li>- Are able to recover said data within a reasonable timeframe if needed</li> <li>- Protect against information loss such as power interruptions and accidental deletions to the best of our abilities.</li> </ul>
<b>Standards for Retention: Rule (e)(ii)</b>	Reasonable controls designed to prevent and detect the unauthorized or accidental creation of, addition to, alteration of, deletion of, or deterioration of an electronically completed or stored Form I-9, including the electronic signature if used.	<p>All completed Forms I-9 are sent to the Compliance Officer at ___COMPANY___ Headquarters for review.</p> <p>Once approved, the Compliance Officer scans the Form I-9 and saves it into the ___COMPANY___ I-9 Library</p> <p>To prevent unauthorized or accidental creation, alteration, deletion, or deterioration of electronically stored I-9 files, access to ___COMPANY___'s I-9 Library is limited the following:</p> <ul style="list-style-type: none"> <li>- Director of HR: _____ – Full editing rights</li> <li>- HR Generalist: _____ – Full editing rights</li> <li>- Payroll Department: Various – Viewing rights only</li> </ul>

		<p>All Forms I-9 are saved in Adobe® "PDF" format using a uniform naming template to ensure ease of access and prevent duplicate files:</p> <ul style="list-style-type: none"> <li>- (LAST NAME)-(First Name)_(Employee Number)</li> </ul> <p>Electronic signatures are not used. Electronic stamps are used for corrections during I-9 audit as authorized by Chief Human Resources Officer.</p>
<p><b>Standards for Retention: Rule (e)(iii)</b></p>	<p>An inspection and quality assurance program evidenced by regular evaluations of the electronic generation or storage system, including periodic checks of the electronically stored Form I-9, including the electronic signature if used.</p>	<p>____COMPANY____ has an inspection and quality assurance program that regularly evaluates the electronic storage system, with periodic checks of the electronically stored Forms I-9.</p> <p>In conjunction with our annual I-9 audit, each newly electronically stored Form I-9 added annually undergoes thorough inspection by the I-9 auditors.</p> <p>The inspection ensures that the policy and procedural controls for creating and correcting the forms have been strictly adhered to; and any practices causing errors are addressed and corrected during the audit with training.</p> <p>Additionally, during the annual audit, all electronically stored Forms I-9 are checked against payroll records to ensure that the ____COMPANY____ I-9 Master File accurately reflects "active" and "terminated" employees</p>
<p><b>Standards for Retention: Rule (e)(iv)</b></p>	<p>In the case of electronically retained Forms I-9, a retrieval system that includes an indexing system that permits searches consistent with the requirements of paragraph (e)(6) of this section.</p>	<p>The electronically stored Forms I-9 are filed according to a detailed index of all data so that any particular I-9 Record can be accessed immediately.</p> <p>All Forms I-9 are saved in Adobe® "PDF" format using a uniform naming template to ensure ease of access and prevent duplicate files:</p> <ul style="list-style-type: none"> <li>- (LAST NAME)-(First Name)_(Employee Number)</li> </ul> <p>The ____COMPANY____ I-9 Master File maintains all electronically stored Form I-9s, divided into "Active" and "Terminated" employee groups, which are indexed alphabetically.</p> <p>Each form can also be readily searched by employee name or employee number so that any particular record can be accessed immediately.</p>
<p><b>Standards for Retention: Rule (e)(v)</b></p>	<p>Ability to reproduce legible and readable hardcopies.</p>	<p>Each of these Form I-9s is evaluated to verify that it will produce a high degree of legibility and readability when displayed on a video display terminal or reproduced on paper</p>



		<ul style="list-style-type: none"> <li>- If it is determined by the Compliance Officer that the original Forms I-9 and supporting documents are not sufficiently legible and readable, they are rescanned at higher resolution.</li> </ul>
<p><b>Standards for Retention: Rule (e)(v)(3)</b></p>	<p>The storage system must not be subject, in whole or in part, to any agreement (such as a contract or license) that would limit or restrict access to and use of the electronic generation or storage system.</p>	<p>All Forms I-9 are created and completed by the employee and I-9 Administrator on physical paper forms and/or using the digital completion method available at <a href="http://www.uscis.gov">www.uscis.gov</a>.  ____COMPANY____ does not use third-party software or services to electronically generate any Form I-9.</p> <p>-----</p> <p>____COMPANY____ uses Microsoft Windows® and Adobe® software to store and access all Forms I-9 and is not subject to any agreement, contract, or license that would limit or restrict access to this software.</p>
<p><b>Standards for Retention: Rule (e)(v)(5)</b></p>	<p>For each electronic generation or storage system used ____COMPANY____ must maintain, and make available upon request, complete descriptions of:</p> <ul style="list-style-type: none"> <li>(i) The electronic generation and storage system, including all procedures relating to its use; and</li> <li>(ii) The indexing system</li> </ul>	<p>All Forms I-9 are created and completed by the employee and I-9 Administrator on physical paper forms and/or using the digital completion method available at <a href="http://www.uscis.gov">www.uscis.gov</a>.  ____COMPANY____ does not use third-party software or services to electronically generate any Form I-9.</p> <p>-----</p> <p>____COMPANY____ Electronic I-9 Procedures - Attachment 1, to this document provides a complete description of the electronic storage system including all procedures relating to its use.</p> <p>The indexing system provided above in response to the requirements of paragraph (e)(6) of this section gives a complete description of the system used.</p> <p>Each of these will be made available upon request.</p>
<p><b>Standards for Retention: Rule (e)(v)(8)</b></p>	<p>At the time of an inspection, ____COMPANY____ must:</p> <ul style="list-style-type: none"> <li>(i) Retrieve and reproduce (including printing copies on paper, if requested) only the Forms I-9 electronically retained in the electronic storage system and supporting documentation</li> </ul>	<p>Upon inspection, ____COMPANY____ will:</p> <ul style="list-style-type: none"> <li>- Retrieve and reproduce (including printing copies on paper, if requested) only the Forms I-9 electronically retained in the electronic storage system and supporting documentation specifically requested by an</li> </ul>

	<p>specifically requested by an agency of the United States, along with associated audit trails;</p> <p>(ii) Provide a requesting agency of the United States with the resources (e.g., appropriate hardware and software, personnel and documentation) necessary to locate, retrieve, read, and reproduce (including paper copies) any electronically stored Forms I-9, any supporting documents, and their associated audit trails, reports, and other data used to maintain the authenticity, integrity, and reliability of the records; and</p> <p>(iii) Provide, if requested, any reasonably available or obtainable electronic summary file(s).</p>	<p>agency of the United States, along with associated audit trails;</p> <ul style="list-style-type: none"> <li>- Provide a requesting agency of the United States with the resources (e.g., appropriate hardware and software, personnel and documentation) necessary to locate, retrieve, read, and reproduce (including paper copies) any electronically stored Forms I-9, any supporting documents, and their associated audit trails, reports, and other data used to maintain the authenticity, integrity, and reliability of the records; and</li> <li>- Provide, if requested, any reasonably available or obtainable electronic summary file(s).</li> </ul>
<b>Documentation: Rule (f)(1)(5)</b>	<p>Maintain and make available to an agency of the United States upon request, documentation of the business processes that:</p> <ul style="list-style-type: none"> <li>(i) Create the retained Forms I-9;</li> <li>(ii) Modify and maintain the retained Forms I-9; &amp;</li> <li>(iii) Establish the authenticity and integrity of the Forms I-9, such as audit trails.</li> </ul>	<p>___COMPANY___ will maintain and make available to an agency of the United States upon request, documentation of the business processes that:</p> <ul style="list-style-type: none"> <li>- Create the retained Forms I-9;</li> <li>- Modify and maintain the retained Forms I-9; &amp;</li> <li>- Establish the authenticity and integrity of the Forms I-9, such as audit trails.</li> </ul>
<b>Security: Rule (g)(1)</b>	<p>Implement an effective records security program that:</p> <ul style="list-style-type: none"> <li>(i) Ensures that only authorized personnel have access to electronic records;</li> <li>(ii) Provides for backup and recovery of records to protect against information loss, such as power interruptions;</li> <li>(iii) Ensures that employees are trained to minimize the risk of unauthorized or accidental alteration or erasure of electronic records; and</li> <li>(iv) Ensure that whenever the electronic record is created, completed, updated, modified, altered, or corrected, a secure and permanent record is created that establishes the date of access, the identity of the individual who accessed the electronic record, and the particular action taken.</li> </ul>	<p>Chief Information Officer certifies in Attachment 2 that ___COMPANY___ does the following:</p> <ul style="list-style-type: none"> <li>- Protect against unauthorized access through hardware, software, and services</li> <li>- Provide data backup and redundancy through multiple instances of archive services</li> <li>- Are able to recover said data within a reasonable timeframe if needed</li> <li>- Protect against information loss such as power interruptions and accidental deletions to the best of our abilities.</li> </ul>
<b>Electronic Signatures: Rule (h)</b>	<p>(i) If a Form I-9 is completed electronically, the attestations in Form I-9 must be completed using a system for capturing an electronic signature that meets the standards set forth in this</p>	<p>___COMPANY___ does not electronically sign the attestation of any Form I-9</p> <p>OR</p>

	<p>paragraph. The system used to capture the electronic signature must include a method to acknowledge that the attestation to be signed has been read by the signatory. The electronic signature must be attached to, or logically associated with, an electronically completed Form I-9. In addition, the system must:</p> <ul style="list-style-type: none"> <li>(ii) Affix the electronic signature at the time of the transaction;</li> <li>(iii) Create and preserve a record verifying the identity of the person producing the signature; and</li> <li>(iv) Upon request of the employee, provide a printed confirmation of the transaction to the person providing the signature.</li> <li>(v) Include a method to acknowledge you have attested to the required information in Section 2.</li> </ul> <p>(2) Any person or entity who is required to ensure proper completion of a Form I-9 and who chooses electronic signature for a required attestation, but who has failed to comply with the standards set forth in this paragraph, is deemed to have not properly completed the Form I-9, in violation of section 274A(a)(1)(B) of the Act and 8 CFR 274a.2(b)(2).</p> <p>(i) Electronic signatures for employer, recruiter or referrer, or representative. If a Form I-9 is completed electronically, the employer, the recruiter or referrer for a fee, or the representative of the employer or the recruiter or referrer, must attest to the required information in Form I-9. The system used to capture the electronic signature should include a method to acknowledge that the attestation to be signed has been read by the signatory. Any person or entity who</p>	<p>Company completes the I-9 electronically and electronic signatures are used.</p> <p>We are in compliance with rule H because we:</p> <hr style="width: 10%; margin-left: 0;"/>
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	<p>has failed to comply with the criteria established by this regulation for electronic signatures, if used, and at the time of inspection does not present a properly completed Form I-9 for the employee, is in violation of section 274A(a)(1)(B) of the Act and 8 CFR 274a.2(b)(2).</p>	
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**August 22, 2012 - ICE Memo from James Dinkins**  
**Guidance on the Collection and Audit Trail Requirements for Electronically Generated Forms I-9**

Government requirement	How we meet the requirement
<p>Whenever an electronic Form I-9 record is created, completed, updated, modified, altered or corrected, a secure and permanent record must be created (audit trail) that establishes the date accessed, who accessed it and what action was taken.</p>	<p>All Forms I-9 are created and completed by the employee and I-9 Administrator on physical paper forms and/or using the digital completion method available at <a href="http://www.uscis.gov">www.uscis.gov</a>.  _____COMPANY_____ does not use third-party software or services to electronically generate any Form I-9.</p> <p style="text-align: center;">-----</p> <p>Any time a Form I-9 is completed, updated, modified, altered, or corrected; the action is permanently recorded in the Review/Comments log of the file and is automatically stamped with the name of the editor (assigned to the respective license) as well as the time and date of the change.</p>
<p>Upon notice of Inspection, _____COMPANY_____ must provide the name of the software being utilized and any internal business practices and protocols related to the generation of, use of, storage of, security of, and inspection and quality assurance programs for the electronically generated Forms I-9.</p>	<p>All Forms I-9 are created and completed by the employee and I-9 Administrator on physical paper forms and/or using the digital completion method available at <a href="http://www.uscis.gov">www.uscis.gov</a>.  _____COMPANY_____ does not use third-party software or services to electronically generate any Form I-9.</p> <p style="text-align: center;">-----</p> <p>Any completion, update, modification, alteration, or correction made to an electronically stored Form I-9 is conducted using Adobe® Acrobat® software, licensed to _____COMPANY_____ and assigned to the I-9 Compliance Officer and can only be accessed by designated _____COMPANY_____ employees who have been trained as I-9 Compliance Officers.</p> <p>The internal business practices and protocols related to the use of, storage of, security of and inspection and quality assurance programs for the electronically stored Forms I-9 are provided in this document and</p>

	<p>in ____COMPANY____ Electronic I-9 Procedures - Attachment 1.</p>
<p>____COMPANY____ should also provide the indexing system identifying how the electronic information contained in the Form I-9 is linked to each employee and documentation of the system used to capture the electronic signature, including identity and attestation of the individual electronically signing the Form I-9.</p>	<p>The electronically stored Forms I-9 are filed according to a detailed index of all data so that any particular I-9 Record can be accessed immediately.</p> <p>All Forms I-9 are saved in Adobe® "PDF" format using a uniform naming template to ensure ease of access and prevent duplicate files:</p> <ul style="list-style-type: none"> <li>- (LAST NAME)-(First Name)_(Employee Number)</li> </ul> <p>The ____COMPANY____ I-9 Master File maintains all electronically stored Form I-9s, divided into "Active" and "Terminated" employee groups, which are indexed alphabetically.</p> <p>Each form can also be readily searched by employee name or employee number so that any particular record can be accessed immediately</p> <p>____COMPANY____ does not electronically sign the attestation of any Form I-9</p>
<p>____COMPANY____ must produce at least one printed completed electronically generated Form I-9 to ensure compliance with the regulation.</p>	<p>All Forms I-9 are created and completed by the employee and I-9 Administrator on physical paper forms and/or using the digital completion method available at <a href="http://www.uscis.gov">www.uscis.gov</a>.</p> <p>____COMPANY____ does not use third-party software or services to electronically generate any Form I-9.</p> <p>However, all electronically stored Forms I-9 are checked for legibility and readability in compliance with the regulation and will be printed upon request by the inspecting agency.</p>
<p>Upon request by an inspecting agency, ____COMPANY____ must provide access to their storage system for a demonstration of the generation of an electronic Form I-9.</p>	<p>All Forms I-9 are created and completed by the employee and I-9 Administrator on physical paper forms and/or using the digital completion method available at <a href="http://www.uscis.gov">www.uscis.gov</a>.</p> <p>____COMPANY____ does not use third-party software or services to electronically generate any Form I-9.</p> <p>-----</p> <p>However, upon request, ____COMPANY____ will provide a demonstration to an inspecting agency of the internal business practices and protocols related to the use of, storage of, security of, and inspection and quality assurance programs for the electronically stored Forms I-9.</p>

# Electronic I-9 Procedures – Attachment 1

This is a sample, please work with your corporate immigration counsel and IT to modify and adopt a policy specifically applicable to your business operations.

## STEP 1: I-9 Administrator

- **Supervise Section 1:** Supervise the employee to complete and sign Section 1 of the Form I-9 on physical paper forms and/or using [www.uscis.gov](http://www.uscis.gov).
- **Complete Section 2:** Review, record and make copies of documents in Section 2.
- Complete and sign Section 2.
- **Transmit Record to Compliance Officer:** Using your company-issued and password-protected cell phone or computer, send completed Forms I-9 and copies of document(s) to the Compliance Officer.

## STEP 2: I-9 Compliance Officer

- **Review:** Review Forms I-9 and supporting documents.
- **If correct,** instruct the I-9 Administrator to mail the original Form I-9 with document(s) to you.
- **If corrections are needed,** instruct the I-9 Administrator on how to correct the errors, and then to email the Form I-9 and document(s) to you for review.
- **Once corrected,** instruct the I-9 Administrator to mail the original Form I-9 with document(s) to you

## STEP 3: I-9 Administrator in the Field

- **Mail originals:** Once approved by the I-9 Compliance Officer, mail the original Form I-9 with document(s) to the I-9 Compliance Officer.

## STEP 4: I-9 Compliance Officer

- **Scan and Save:** Scan and save all materials in to the \_\_company\_\_ I-9 Library in Adobe® "PDF" format using the uniform naming template:
  - (LAST NAME)-(First Name)\_(Employee Number)

## STEP 5: I-9 Auditors during Annual Audit

- **Review electronically stored Forms I-9** to ensure that when printed, the documents produce a high degree of legibility and readability.
- **Cause IT to conduct a security review** of all \_\_company\_\_ information technology, including:
  - Security and protection against unauthorized access to \_\_company's\_\_ secure servers.
  - Backup and recovery of \_\_company's\_\_'s secured servers to protect against information loss, power interruptions, or accidental deletion.
- **Cause orderly, documented destruction** of original Forms I-9 with document(s).

## STEP 6: I-9 Compliance Officer

- **Make corrections**, per I-9 Audit Sheets:
  - On original I-9s, Compliance Officer will use electronic stamp to sign and date.
  - The same may be delegated to I-9 Administrators using their own stamps.
- **Terminated employees**, move to inactive library
- **Arrange for necessary training** for newly hired I-9 Administrators and recertification for those previously trained.

# Virtual I-9 Policy (Available Only During Pandemic)

Sample language for a temporary virtual I-9 policy.

- Review of documents virtually is temporarily allowed by DHS until the national emergency ends, whichever is sooner. DHS, while temporarily allowing virtual (not in person) I-9 document review, also explicitly requires a **written** Virtual I-9 policy.

-----  
Normally virtual I-9 are **not** allowed, but **DHS has allowed this a temporary measure** until or until national emergency is called off, whichever is earlier.

## 1. DHS-Required SAMPLE POLICY

Before you begin using the newly allowed temporary virtual I-9 process, DHS requires that you document the process through a written policy. Proposed language is below

### **TEMPORARY COVID-19 Remote Virtual I-9 Onboarding and Telework Policy/Procedures**

NAME OF EMPLOYER: \_\_\_\_\_

#### VALIDITY:

This policy in effect until \_\_\_\_\_, or within three business days after the termination of the national emergency, whichever comes first.

#### POLICY CONSIDERATIONS:

During this COVID-19 Pandemic, this employer has instituted a Virtual I-9 Remote Onboarding and Telework Policy to conform with recommended and required social distancing rules and lockdown protocols from our federal, state, and local governments. This is to ensure health and safety of all employees and community members. This includes any onboarding and new hire processes. The onboarding process will occur remotely. We will be inspecting identity and employment authorization documents virtually. Per DHS, "Employers with employees taking physical proximity precautions due to COVID-19 will not be required to review the employee's identity and employment authorization documents in the employee's physical presence." We are able to inspect Section 2 documents over video conference, fax, or e-mail and obtain and retain copies of the documents within three business days. As soon as normal operations resume, we will require physical examination of the documents that were accepted under this policy within three business days.

#### DETERMINING HOW WE QUALIFY:



We qualify because/**Check all that apply:**

- We work 100% remotely,

**OR**

- We are under a recommended and required social distancing rules and lockdown protocols from our federal, state, and local governments

#### TERMPORARY VIRTUAL I-9 ONBORADING PROCEDURES:

##### **Virtual I-9 Process**

1. Administer the I-9 process remotely. Section 1 on first day of employment. Finish Section 2 within 3 days. Inspect section 2 documents with help of electronic tools. Retain copy or copies of Section 2 documents. I-9 administrators should write "**COVID-19**" on the I-9 as the reason for the physical inspection delay in the additional information field in Section 2.
2. Complete E-Verify within same three days. If late, chose "COVID -19" on drop-down menu.

#### ONCE NORMAL OPERATIONS RESUME

1. Once normal operations resume, within 3 days, require all employees who were onboarded using remote verification present identity and employment eligibility documentation for in-person verification.
2. Add "**documents physically examined**" with the date of inspection to the Section 2 additional information field.

# 3

- **E-Verify Procedures**

- **E-Verify MOU**

# E-Verify Procedures

## ▪ WHAT IS THIS?

These are sample E-Verify procedures and documents to assist the employer with the E-Verify process administration.

## ▪ HOW TO USE THIS

Review the procedures. If they are a good fit for your company, adopt them and conduct training.

## NOTES:

# E-VERIFY PROCEDURES

After the I-9 is properly completed to the I-9 Administrator's satisfaction, and within 3 days of beginning of the new employee's employment, enter information into E-Verify.

## □ **How to Set Up E-Verify:**

1. Go to <https://myeverify.uscis.gov/> and "Create an Account"
2. Sign up the company and a program administrator-once these are signed up, then select users and have them create accounts as well.
3. Place E-Verify MOU in this binder
4. You will be emailed a Username and a Temporary Password, then:
  - a. [Log-in](#) using that username and password
  - b. Update the password to something of your choice
5. Take and Pass E-Verify Tutorial
6. Start using it for all newly hired employees!

## □ **Memorandum of Understanding (MOU)**

The Immigration Compliance Officer together with the employer's legal counsel should review the MOU prior to signing. If the decision is made to proceed, once the MOU is signed, keep a copy in your Immigration Compliance Plan, Policy and Procedures book.

## □ **Training**

I-9 Administrators performing E-Verify queries should be re-trained on E-Verify administration annually, as part of the I-9 annual training.

## □ **E-Verify Posters**

Employer should post E-Verify posters so they are visible to job applicants and new hires.

For remote hires, include electronic copy of E-Verify posters with list of acceptable documents with onboarding paperwork.

## □ **Good I-9s First**

E-Verification should not be performed before the I-9 Administrator is confident that the I-9 is properly completed.

## □ **Designate Roles**

Immigration Compliance Officer should make sure I-9 Administrators and other participants in E-Verify process, properly register in the E-Verify system and understand their role, per attached User Roles and Permission Chart

□ **FAR E-Verify for Federal Contractors**

Federal Contractors with FAR (Federal Acquisition Regulations) E-Verify clauses in their contracts should be become familiar and implement FAR E-Verify requirements.

□ **Reports**

Immigration Compliance Officer should make sure E-Verify reports are run at the time of the annual I-9 self-Audit and all outstanding issues, is any, are resolved. Use the attached documents and documents contained in the Appendix for training and record keeping.

# E-VERIFY MEMORANDUM OF UNDERSTANDING

- Insert your Company's signed Memorandum of Understanding behind this page.

# E-Verify User Posters

Insert E-Verify User Posters here

# User Roles and Permissions Chart

- Locate your company's user roles and permissions chart in E-Verify, only allow trained I-9 Administrators, as authorized by E-Verify administrator, to administer I-9s and E-Verify.



# This Organization Participates in E-Verify



**SAMPLE ONLY!**

This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

**IMPORTANT:** If the Government cannot confirm that you are authorized to work, this employer is required to give you written instructions and an opportunity to contact DHS and/or the SSA before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants and may not limit or influence the choice of documents you present for use on the Form I-9.

To determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo matching tool to match the photograph appearing on some permanent resident cards, employment authorization cards, and U.S. passports with the official U.S. government photograph. E-Verify also checks data from driver's licenses and identification cards issued by some states.

If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the employment eligibility verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 800-255-7688, 800-237-2515 (TDD) or at [www.justice.gov/crt/osc](http://www.justice.gov/crt/osc).

## E-Verify Works for Everyone

For more information on E-Verify, please contact DHS:

**888-897-7781**

**[www.dhs.gov/E-Verify](http://www.dhs.gov/E-Verify)**

### NOTICE:

**Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.**



**E-VERIFY IS A SERVICE OF DHS AND SSA**

The E-Verify logo and mark are registered trademarks of Department of Homeland Security. Commercial sale of this poster is strictly prohibited.

# Esta organización participa en E-Verify



## MUESTRA SOLAMENTE!

Este empleador proporcionará a la Administración del Seguro Social (SSA, por sus siglas en inglés) y, de ser necesario, al Departamento de Seguridad Nacional (DHS, por sus siglas en inglés) la información incluida en el Formulario I-9 de todo empleado nuevo con el propósito de confirmar su autorización de trabajo.

**IMPORTANTE:** Si el gobierno no puede confirmar que usted tiene autorización para trabajar, el empleador debe suministrarle las instrucciones por escrito y darle la oportunidad de ponerse en contacto con DHS o SSA antes de sancionarlo de cualquier forma o finalizar la relación laboral.

Los empleadores no pueden utilizar E-Verify para realizar preselecciones de solicitantes y no pueden limitar ni influenciar la selección de los documentos que usted presente para su inclusión en el Formulario I-9.

Para determinar si los documentos incluidos en el Formulario I-9 son válidos, este empleador utiliza la técnica de comparación fotográfica para comparar la fotografía que aparece en las Tarjetas de Residente Permanente, Tarjetas de Autorización de Empleo y pasaportes de los EE. UU. con la fotografía oficial del gobierno de los EE. UU. Asimismo, E-Verify verifica los datos incluidos en licencias de conducir y tarjetas de identificación emitidas por algunos estados.

Si considera que su empleador ha infringido sus responsabilidades en virtud de este programa o lo ha discriminado durante el proceso de verificación de la elegibilidad de empleo por su origen nacional o estatus de ciudadanía, comuníquese con la Oficina del Consejero Especial llamando al 800-255-7688, 800-237-2515 (para personas con impedimentos auditivos) o visitando [www.justice.gov/crt/osc](http://www.justice.gov/crt/osc).

## E-Verify funciona para todos

Para obtener más información sobre E-Verify, comuníquese con DHS al:

**888-897-7781**

**[www.dhs.gov/E-Verify](http://www.dhs.gov/E-Verify)**

### AVISO:

La ley federal exige a todos los empleadores que verifiquen la identidad y la elegibilidad de empleo de todas las personas contratadas en los Estados Unidos.



E-VERIFY IS A SERVICE OF DHS AND SSA

El logotipo y la marca de E-Verify son marcas registradas del Departamento de Seguridad Nacional. Queda estrictamente prohibida la venta comercial de este afiche.

# IF YOU HAVE THE RIGHT TO WORK



Don't let anyone take it away.

There are laws to protect you from discrimination in the workplace.

## You should know that...

In most cases, employers cannot deny you a job or fire you because of your national origin or citizenship status or refuse to accept your legally acceptable documents.

Employers cannot reject documents because they have a future expiration date.

Employers cannot terminate you because of E-Verify without giving you an opportunity to resolve the problem.

In most cases, employers cannot require you to be a U.S. citizen or a lawful permanent resident.

## Contact IER

For assistance in your own language  
Phone: 1-800-255-7688  
TTY: 1-800-237-2515

Email us  
[IER@usdoj.gov](mailto:IER@usdoj.gov)

Or write to  
U.S. Department of Justice – CRT  
Immigrant and Employee Rights – NYA  
950 Pennsylvania Ave., NW  
Washington, DC 20530

If any of these things happen to you, contact the Immigrant and Employee Rights Section (IER).



— DEPARTMENT OF JUSTICE —  
IMMIGRANT & EMPLOYEE RIGHTS SECTION  
— CIVIL RIGHTS DIVISION —

Immigrant and Employee Rights Section

U.S. Department of Justice, Civil Rights Division

[www.justice.gov/ier](http://www.justice.gov/ier)

# SI USTED TIENE DERECHO A TRABAJAR



No deje que nadie se lo quite.

Existen leyes que lo protegen contra la discriminación en el trabajo.

## Usted debe saber que...

En la mayoría de los casos, los empleadores no pueden negarle un empleo o despedirlo debido a su nacionalidad de origen o estatus de ciudadanía, ni tampoco negarse a aceptar sus documentos válidos y legales.

Los empleadores no pueden rechazar documentos porque tengan una fecha de vencimiento futura.

Los empleadores no pueden despedirlo debido a E-Verify sin darle una oportunidad de resolver el problema

En la mayoría de los casos, los empleadores no pueden exigir que usted sea ciudadano estadounidense o residente legal permanente.

## Comuníquese con la IER

Para ayuda en su propio idioma:  
Teléfono: 1-800-255-7688  
TTY: 1-800-237-2515

Mándenos un correo:  
[IER@usdoj.gov](mailto:IER@usdoj.gov)

O escribanos a:  
U.S. Department of Justice – CRT  
Immigrant and Employee Rights – NYA  
950 Pennsylvania Ave., NW  
Washington, DC 20530

Si alguna de estas cosas le ha sucedido, comuníquese con la Sección de Derechos de Inmigrantes y Empleados (IER, por sus siglas en inglés)



DEPARTAMENTO DE JUSTICIA DE LOS EE. UU.  
SECCIÓN DE DERECHOS DE INMIGRANTES Y EMPLEADOS  
DIVISIÓN DE DERECHOS CIVILES

Sección de Derechos de Inmigrantes y Empleados  
Departamento de Justicia de los EE. UU., División de Derechos Civiles

[www.justice.gov/ier](http://www.justice.gov/ier)  
[www.justice.gov/crt-about/espanol/ier](http://www.justice.gov/crt-about/espanol/ier)

# **User Roles and Permission Chart**

## USER ROLE OVERVIEW

USER ROLE	PERMISSIONS
<b>Program Administrator</b> (at least one required)	Every E-Verify account must have at least one program administrator. The program administrator is responsible for following all E-Verify program rules and staying informed of changes to E-Verify policies and procedures. The program administrator role includes functions of a general user. Permissions include: <ul style="list-style-type: none"> <li>• Registering new users</li> <li>• Creating user accounts for other program administrators and general users</li> <li>• Creating and managing cases</li> <li>• Viewing reports</li> <li>• Updating profile information for other program administrators and general users</li> <li>• Unlocking user accounts</li> <li>• Closing company and user accounts</li> </ul>
<b>General User</b> (optional)	Employers can have as many or no general users as they desire. The general user is responsible for following all E-Verify program rules and staying informed of changes to E-Verify policies and procedures. Permissions include: <ul style="list-style-type: none"> <li>• Creating and managing own cases</li> <li>• Viewing reports</li> <li>• Updating his/her own user profile</li> </ul>

### 1.5 USER RULES AND RESPONSIBILITIES

All E-Verify users are bound by the guidelines in the MOU and the rules and responsibilities outlined in this manual.

To ensure proper use of E-Verify and protection of employee workplace rights, employers should periodically review all of the program rules and employer responsibilities with their users.



For information on E-Verify rules and responsibilities for federal contractors with the FAR E-Verify clause, refer to the [‘E-Verify Supplemental Guide for Federal Contractors.’](#)

All E-Verify users must follow the guidelines specified in the ‘Rules and Responsibilities Overview.’

#### RULES AND RESPONSIBILITIES OVERVIEW

Employers who participate in E-Verify **MUST**:

- ✓ Follow E-Verify procedures for each newly hired employee while enrolled and participating in E-Verify.
- ✓ Notify each job applicant of E-Verify participation.
- ✓ Clearly display the ‘Notice of E-Verify Participation’ and the ‘Right to Work’ posters in English and Spanish and may also display the posters in other languages provided by DHS.

# 4

- **SSNVS Registration**
- **SSN No-Match  
Procedures**

# SSNVS Registration Procedures and Social Security Number No-Match Procedures

## WHAT IS THIS?

This section contains instructions for registering and using the Social Security Number Verification Service (“SSNVS”) administered by the Social Security Administration. We also provide sample procedures to handle social security number “no-matches”. Enclosed is a Q and A sheet issued by ICE as part of the planned SSN No-Match Letters regulation. This Q and A is informal guidance that is important because ICE continues to use SSN no-match letters in employer investigations as evidence the employer was on notice of a potential employment eligibility issue, thus, may have had constructive knowledge under IRCA.

## HOW TO USE THIS

Review the proposed procedure and adopt it if it fits your company. If it does not, draft a SSN no-match letter procedures bearing in mind that they need to take care of the potential constructive knowledge issue, and they must ensure that there is no discrimination.



# SOCIAL SECURITY NUMBER VERIFICATION SERVICE (SSNVS) REGISTRATION PROCEDURE

## How to Enroll in SSNVS:

- Register User with Business Services Online by going to this link:  
<https://www.ssa.gov/bsowelcome.htm> and clicking "Register"
- Input individual information, including name, phone, address, email, and SSN
  - Register for Social Security Number Verification Service
  - Print the confirmation page showing you have registered for SSNVS and put behind this tab
- SSA will physically mail a Username and Temporary Password (typically in two separate mailings)
- When you receive this, log-in by clicking "Log In" on the main page:  
<https://www.ssa.gov/bsowelcome.htm>
- Insert SSNVS registration materials here.

## PROCEDURES TO ADDRESS SSN NO-MATCH

### When to Use SSNVS:

SSNVS should be used when you receive information other than from E-Verify that your employee's social security number is not matching government records. It is **only** to be used to verify someone's Social Security Number IF you receive prompting from another source stating the number is mismatched on other records. It should **not** be used to randomly verify your employee's social security number.

Examples of when you may need to use SSNVS:

1. If you are issued a "No-Match" letter from Social Security Administration letting you know some filing with an individual's social security number does not match SSA's records.
2. Employee files for Worker's Compensation or Unemployment Benefits and DOL issues a letter asking to verify a social security number that does not match employment records.
3. You receive information challenging SSN/identity of the worker from any other source.

What to do if you receive a notice of mismatch of employee SSN:

1. Promptly (no later than 30 days) check your records to ensure the mismatch was not the result of an error on your part;
2. If this does not resolve the problem, ask your employee to confirm the accuracy of your records;
3. If necessary, ask the employee to resolve the issue with SSA;
4. If you were able to successfully resolve the mismatch, make sure you have followed all the instructions enclosed in the SSA letter (or other government correspondence).
5. You should also verify that the correction has been made by using the Social Security Number Verification System (SSNVS) administered by SSA, and retain a record of the date and time of your verification.

6. If none of the foregoing measures resolves the matter within 90 days of receipt of no-match letter, you should complete, within 3 days, a new Form I-9 as if the employee in question was newly hired, except that no document may be used to verify the employee's authorization for work that uses the questionable Social Security number and no document may be used to verify the employee's identity that does not have a photograph of the employee.



## U.S. Citizenship and Immigration Services

Dear Employer:

The purpose of this letter is to provide you with additional guidance on how to respond to the enclosed letter from the Social Security Administration (SSA) in a manner that is consistent with your obligations under United States immigration laws.

You are now aware that the Social Security numbers you have provided on W-2 Forms for certain employees do not match SSA's records. Many employers that receive this information are concerned about how to respond appropriately and whether the receipt of such information implicates an employer's obligations under the Immigration Nationality Act. This letter will answer the common questions arising from this situation.

**Q: Can I simply disregard the letter from the SSA?**

**A: No.** You have received official notification of a problem that may have significant legal consequences for you and your employees. If you elect to disregard the notice you have received and if it is determined that some employees listed in the enclosed letter were not authorized to work, the Department of Homeland Security could determine that you have violated the law by knowingly continuing to employ unauthorized persons. This could lead to civil and criminal sanctions.

**Q: What should I do?**

**A: You should take reasonable steps to resolve the mismatch**, and apply these reasonable steps uniformly to all employees listed in the enclosed SSA letter. It is possible that a mismatch was the result of a clerical error on the part of the employee, the employer, or the government. You should:

- 1) Promptly (no later than 30 days) check your records to ensure that the mismatch was not the result of an error on your part;
- 2) If this does not resolve the problem, ask your employee to confirm the accuracy of your records;
- 3) If necessary, ask the employee to resolve the issue with SSA;
- 4) If you were able to successfully resolve the mismatch, make sure you have followed all of the instructions in the enclosed SSA letter. You should also verify that the correction has been made by using the Social Security Number Verification System (SSNVS) administered by SSA, and retain a record of the date and time of your verification. SSNVS can be

accessed through <http://www.ssa.gov/employer/ssnv.htm> or by telephone at 1-800-772-6270; and

- 5) If none of the foregoing measures resolves the matter within 90 days of receipt of this letter, you should complete, within three days, a new I-9 Form as if the employee in question were newly hired, except that no document may be used to verify the employee's authorization for work that uses the questionable Social Security number and no document may be used to verify the employee's identity that does not have a photograph of the employee.

If you cannot confirm that the employee is authorized to work (by following the above procedures), you risk liability for violating the law by knowingly continuing to employ unauthorized persons.

**Q: Does receiving a mismatch letter, standing alone, indicate that I ought to immediately terminate the employees whose numbers did not match SSA records?**

**A:** There are many reasons for a mismatch between employer and SSA records, including transcription and name changes due to marriage that are not reported to SSA. Employers should not assume that the mismatch is the result of any wrongdoing on the part of the employee. Moreover, an employer who takes action against an employee based on nothing more substantial than a mismatch letter may in fact violate the law.

**Q: Will I be liable for discrimination charges brought by the United States if I terminate the employee after following the steps outlined above?**

**A: No.** An employer that receives such a letter and terminates employees without attempting to resolve the mismatches, or who treats employees differently based upon national origin or other prohibited characteristics, may be found to have engaged in unlawful discrimination. However, if an employer that follows all of the procedures outlined by DHS in this letter (and <http://www.ice.gov>) cannot determine that an employee is authorized to work in the United States, and therefore terminates that employee, and if that employer applied the same procedures to all employees referenced in the mismatch letter, then that employer will not be subject to suit by the United States under the Immigration and Nationality Act's anti-discrimination provision.

If you have any additional questions, please visit <http://www.ice.gov> for extensive information or feel free to contact the ICE Office of Investigations at 800-421-7105.

# 5

- **I-9 Training Program/Schedule**
- **Training Materials**
- **Training Certificates**

# I-9 Training Program/Schedule, Training Materials, Training Certificates

## ▪ WHAT IS THIS?

This is a sample training program/schedule to ensure annual training of I-9 Administrators, in-house I-9 Auditors (if used), and the Corporate Immigration Compliance Officer.

## ▪ HOW TO USE THIS

Review the program/schedule, and if it is a good fit for the company, adopt the schedule.

## NOTES:

EMPLOYER \_\_\_\_\_

**ANNUAL EMPLOYER IMMIGRATION COMPLIANCE TRAINING PROGRAM/  
SCHEDULE**

- We provide immigration compliance training for our I-9 Administrators, in-house I-9 Auditors (if using), and the Immigration Compliance Officer once a year.
- Per guidance from ICE Best Employment Practices, only trained I-9 Administrators are allowed to administer I-9 and E-Verify.
- Any new I-9 Administrator needs to first receive I-9 training and obtain a training certificate before administering I-9 and E-Verify.

We adhere to the following training schedule:

\_\_\_\_\_ Date of Last Training

**CONDUCTED BY:**

\_\_\_\_\_  
Signature Name

\_\_\_\_\_  
Title Date

**LIST OF PARTICIPANTS:**

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Name Title





Written Materials, Copy Attached:

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---

**20\_\_ Training Scheduled for** \_\_\_\_\_

**20\_\_ Training Performed on** \_\_\_\_\_

**CONDUCTED BY:**

---

Signature

Name

---

Title

Date

**LIST OF PARTICIPANTS:**

---

Name

Title

---

Name

Title

---

Name

Title

Written Materials, Copy Attached:

---

---

20\_\_ Training Scheduled for \_\_\_\_\_

20\_\_ Training Performed on \_\_\_\_\_

**CONDUCTED BY:**

\_\_\_\_\_  
Signature Name

\_\_\_\_\_  
Title Date

**LIST OF PARTICIPANTS:**

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Name Title

Written Materials, Copy Attached:

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

20\_\_ Training Scheduled for \_\_\_\_\_

20\_\_ Training Performed on \_\_\_\_\_

**CONDUCTED BY:**

---

Signature

Name

---

Title

Date

**LIST OF PARTICIPANTS:**

---

Name

Title

---

Name

Title

---

Name

Title

Written Materials, Copy Attached:

---

---

20\_\_ Training Scheduled for \_\_\_\_\_

20\_\_ Training Performed on \_\_\_\_\_

**CONDUCTED BY:**

---

Signature

Name

---

Title

Date

**LIST OF PARTICIPANTS:**

---

Name

Title

---

Name

Title

---

Name

Title

Written Materials, Copy Attached:

---

---

**20\_\_ Training Scheduled for \_\_\_\_\_**

**20\_\_ Training Performed on \_\_\_\_\_**

**CONDUCTED BY:**

---

Signature

Name

---

Title

Date

**LIST OF PARTICIPANTS:**

---

Name

Title

---

Name

Title

---

Name

Title

Written Materials, Copy Attached:

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20\_\_ Training Scheduled for \_\_\_\_\_

20\_\_ Training Performed on \_\_\_\_\_

**CONDUCTED BY:**

---

Signature

Name

---

Title

Date

**LIST OF PARTICIPANTS:**

---

Name

Title

---

Name

Title

---

Name

Title

Written Materials, Copy Attached:

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20\_\_ Training Scheduled for \_\_\_\_\_

20\_\_ Training Performed on \_\_\_\_\_

**CONDUCTED BY:**

---

Signature

Name

---

Title

Date

**LIST OF PARTICIPANTS:**

---

Name

Title

---

Name

Title

---

Name

Title

Written Materials, Copy Attached:

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**Employment Eligibility Verification**  
**Department of Homeland Security**  
 U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
 OMB No. 1615-0047  
 Expires 10/31/2022

▶ **START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.**

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ 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.)*

Last Name <i>(Family Name)</i>		First Name <i>(Given Name)</i>		Middle Initial	Other Last Names Used <i>(if any)</i>	
Address <i>(Street Number and Name)</i>			Apt. Number	City or Town		State ZIP Code
Date of Birth <i>(mm/dd/yyyy)</i>	U.S. Social Security Number □□□□ - □□ - □□□□		Employee's E-mail Address		Employee's Telephone Number	

**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 boxes):**

<input type="checkbox"/> 1. A citizen of the United States	
<input type="checkbox"/> 2. A noncitizen national of the United States <i>(See instructions)</i>	
<input type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____	
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____ Some aliens may write "N/A" in the expiration date field. <i>(See instructions)</i>	
<p><i>Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.</i></p> <p>1. Alien Registration Number/USCIS Number: _____  <b>OR</b>          2. Form I-94 Admission Number: _____  <b>OR</b>          3. Foreign Passport Number: _____          Country of Issuance: _____</p>	
QR Code - Section 1 Do Not Write In This Space	

Signature of Employee	Today's Date <i>(mm/dd/yyyy)</i>
-----------------------	----------------------------------

**Preparer and/or Translator Certification (check one):**  
 I did not use a preparer or translator.     A preparer(s) and/or translator(s) assisted the employee in completing Section 1.  
*(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)*

**I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.**

Signature of Preparer or Translator		Today's Date <i>(mm/dd/yyyy)</i>	
Last Name <i>(Family Name)</i>		First Name <i>(Given Name)</i>	
Address <i>(Street Number and Name)</i>		City or Town	State ZIP Code

Employer Completes Next Page





**Employment Eligibility Verification**  
**Department of Homeland Security**  
 U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
 OMB No. 1615-0047  
 Expires 10/31/2022

**Section 2. Employer or Authorized Representative Review and Verification**

*(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")*

<b>Employee Info from Section 1</b>	Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
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List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title		Document Title		Document Title
Issuing Authority		Issuing Authority		Issuing Authority
Document Number		Document Number		Document Number
Expiration Date (if any) (mm/dd/yyyy)		Expiration Date (if any) (mm/dd/yyyy)		Expiration Date (if any) (mm/dd/yyyy)
Document Title		Additional Information		QR Code - Sections 2 & 3 Do Not Write In This Space
Issuing Authority				
Document Number				
Expiration Date (if any) (mm/dd/yyyy)				
Document Title				
Issuing Authority				
Document Number				
Expiration Date (if any) (mm/dd/yyyy)				

**Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.**

**The employee's first day of employment (mm/dd/yyyy):** \_\_\_\_\_ **(See instructions for exemptions)**

Signature of Employer or Authorized Representative		Today's Date (mm/dd/yyyy)	Title of Employer or Authorized Representative	
Last Name of Employer or Authorized Representative	First Name of Employer or Authorized Representative		Employer's Business or Organization Name	
Employer's Business or Organization Address (Street Number and Name)		City or Town	State	ZIP Code

**Section 3. Reverification and Rehires** *(To be completed and signed by employer or authorized representative.)*

<b>A. New Name (if applicable)</b>			<b>B. Date of Rehire (if applicable)</b>	
Last Name (Family Name)	First Name (Given Name)	Middle Initial	Date (mm/dd/yyyy)	

**C. If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below.**

Document Title	Document Number	Expiration Date (if any) (mm/dd/yyyy)
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**I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized 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	Today's Date (mm/dd/yyyy)	Name of Employer or Authorized Representative
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## 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.

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Authorization
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:               <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                   <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(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.</li> </ol> </li> </ol> </li> <li>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</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> <li style="text-align: center;"><b>For persons under age 18 who are unable to present a document listed above:</b></li> <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. A Social Security Account Number card, unless the card includes one of the following restrictions:               <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>

**Examples of many of these documents appear in the Handbook for Employers (M-274).**

**Refer to the instructions for more information about acceptable receipts.**



# Instructions for Form I-9, Employment Eligibility Verification

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-9

OMB No. 1615-0047  
Expires 10/31/2022

**Anti-Discrimination Notice.** It is illegal to discriminate against work-authorized individuals in hiring, firing, recruitment or referral for a fee, or in the employment eligibility verification (Form I-9 and E-Verify) process based on that individual's citizenship status, immigration status or national origin. Employers CANNOT specify which document(s) the employee may present to establish employment authorization. The employer must allow the employee to choose the documents to be presented from the Lists of Acceptable Documents, found on the last page of Form I-9. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination. For more information, contact the Immigrant and Employee Rights Section (IER) in the Department of Justice's Civil Rights Division at <https://www.justice.gov/ier>.

## What is the Purpose of This Form?

Employers must complete Form I-9 to document verification of the identity and employment authorization of each new employee (both citizen and noncitizen) hired after November 6, 1986, to work in the United States. In the Commonwealth of the Northern Mariana Islands (CNMI), employers must complete Form I-9 to document verification of the identity and employment authorization of each new employee (both citizen and noncitizen) hired after November 27, 2011.

## General Instructions

Both employers and employees are responsible for completing their respective sections of Form I-9. For the purpose of completing this form, the term “employer” means all employers, including those recruiters and referrers for a fee who are agricultural associations, agricultural employers, or farm labor contractors, as defined in section 3 of the Migrant and Seasonal Agricultural Worker Protection Act, Public Law 97-470 (29 U.S.C. 1802). An “employee” is a person who performs labor or services in the United States for an employer in return for wages or other remuneration. The term “Employee” does not include those who do not receive any form of remuneration (volunteers), independent contractors or those engaged in certain casual domestic employment. Form I-9 has three sections. Employees complete Section 1. Employers complete Section 2 and, when applicable, Section 3. Employers may be fined if the form is not properly completed. See 8 USC § 1324a and 8 CFR § 274a.10. Individuals may be prosecuted for knowingly and willfully entering false information on the form. Employers are responsible for retaining completed forms. **Do not mail completed forms to U.S. Citizenship and Immigration Services (USCIS) or Immigration and Customs Enforcement (ICE).**

These instructions will assist you in properly completing Form I-9. The employer must ensure that all pages of the instructions and Lists of Acceptable Documents are available, either in print or electronically, to all employees completing this form. When completing the form on a computer, the English version of the form includes specific instructions for each field and drop-down lists for universally used abbreviations and acceptable documents. To access these instructions, move the cursor over each field or click on the question mark symbol ( ? ) within the field. Employers and employees can also access this full set of instructions at any time by clicking the Instructions button at the top of each page when completing the form on a computer that is connected to the Internet.

Employers and employees may choose to complete any or all sections of the form on paper or using a computer, or a combination of both. Forms I-9 obtained from the USCIS website are not considered electronic Forms I-9 under DHS regulations and, therefore, cannot be electronically signed. Therefore, regardless of the method you used to enter information into each field, you must print a hard copy of the form, then sign and date the hard copy by hand where required.

Employers can obtain a blank copy of Form I-9 from the USCIS website at <https://www.uscis.gov/i-9>. This form is in portable document format (.pdf) that is fillable and savable. That means that you may download it, or simply print out a blank copy to enter information by hand. You may also request paper Forms I-9 from USCIS.

Certain features of Form I-9 that allow for data entry on personal computers may make the form appear to be more than two pages. When using a computer, Form I-9 has been designed to print as two pages. Using more than one preparer and/or translator will add an additional page to the form, regardless of your method of completion. You are not required to print, retain or store the page containing the Lists of Acceptable Documents.

The form will also populate certain fields with N/A when certain user choices ensure that particular fields will not be completed. The Print button located at the top of each page that will print any number of pages the user selects. Also, the Start Over button located at the top of each page will clear all the fields on the form.

The Spanish version of Form I-9 does not include the additional instructions and drop-down lists described above. Employers in Puerto Rico may use either the Spanish or English version of the form. Employers outside of Puerto Rico must retain the English version of the form for their records, but may use the Spanish form as a translation tool. Additional guidance to complete the form may be found in the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#) and on USCIS' Form I-9 website, [I-9 Central](#).

## Completing Section I: Employee Information and Attestation

You, the employee, must complete each field in Section 1 as described below. Newly hired employees must complete and sign Section 1 no later than the first day of employment. Section 1 should never be completed before you have accepted a job offer.

### *Entering Your Employee Information*

**Last Name (Family Name):** Enter your full legal last name. Your last name is your family name or surname. If you have two last names or a hyphenated last name, include both names in the Last Name field. *Examples of correctly entered last names include: De La Cruz, O'Neill, Garcia Lopez, Smith-Johnson, Nguyen.* If you only have one name, enter it in this field, then enter "Unknown" in the First Name field. You may not enter "Unknown" in both the Last Name field and the First Name field.

**First Name (Given Name):** Enter your full legal first name. Your first name is your given name. *Some examples of correctly entered first names include: Jessica, John-Paul, Tae Young, D'Shaun, Mai.* If you only have one name, enter it in the Last Name field, then enter "Unknown" in this field. You may not enter "Unknown" in both the First Name field and the Last Name field.

**Middle Initial:** Your middle initial is the first letter of your second given name, or the first letter of your middle name, if any. If you have more than one middle name, enter the first letter of your first middle name. If you do not have a middle name, enter N/A in this field.

**Other Last Names Used:** Provide all other last names used, if any (e.g., maiden name). Enter N/A if you have not used other last names. For example, if you legally changed your last name from Smith to Jones, you should enter the name Smith in this field.

**Address (Street Name and Number):** Enter the street name and number of the current address of your residence. If you are a border commuter from Canada or Mexico, you may enter your Canada or Mexico address in this field. If your residence does not have a physical address, enter a description of the location of your residence, such as "3 miles southwest of Anytown post office near water tower."

**Apartment:** Enter the number(s) or letter(s) that identify(ies) your apartment. If you do not live in an apartment, enter N/A.

**City or Town:** Enter your city, town or village in this field. If your residence is not located in a city, town or village, enter your county, township, reservation, etc., in this field. If you are a border commuter from Canada, enter your city and province in this field. If you are a border commuter from Mexico, enter your city and state in this field.

**State:** Enter the abbreviation of your state or territory in this field. If you are a border commuter from Canada or Mexico, enter your country abbreviation in this field.

**ZIP Code:** Enter your 5-digit ZIP code. If you are a border commuter from Canada or Mexico, enter your 5- or 6-digit postal code in this field.

**Date of Birth (mm/dd/yyyy):** Enter your date of birth as a 2-digit month, 2-digit day, and 4-digit year (mm/dd/yyyy). For example, enter January 8, 1980 as 01/08/1980.

**U.S. Social Security Number:** Providing your 9-digit Social Security number is voluntary on Form I-9 unless your employer participates in E-Verify. If your employer participates in E-Verify and:

1. You have been issued a Social Security number, you must provide it in this field; or
2. You have applied for, but have not yet received a Social Security number, leave this field blank until you receive a Social Security number.

**Employee's E-mail Address (Optional):** Providing your e-mail address is optional on Form I-9, but the field cannot be left blank. To enter your e-mail address, use this format: name@site.domain. One reason Department of Homeland Security (DHS) may e-mail you is if your employer uses E-Verify and DHS learns of a potential mismatch between the information provided and the information in government records. This e-mail would contain information on how to begin to resolve the potential mismatch. You may use either your personal or work e-mail address in this field. Enter N/A if you do not enter your e-mail address.

**Employee's Telephone Number (Optional):** Providing your telephone number is optional on Form I-9, but the field cannot be left blank. If you enter your area code and telephone number, use this format: 000-000-0000. Enter N/A if you do not enter your telephone number.

### ***Attesting to Your Citizenship or Immigration Status***

You must select one box to attest to your citizenship or immigration status.

- 1. A citizen of the United States.**
- 2. A noncitizen national of the United States:** An individual born in American Samoa, certain former citizens of the former Trust Territory of the Pacific Islands, and certain children of noncitizen nationals born abroad.
- 3. A lawful permanent resident:** An individual who is not a U.S. citizen and who resides in the United States under legally recognized and lawfully recorded permanent residence as an immigrant. This term includes conditional residents. Asylees and refugees should not select this status, but should instead select "An Alien authorized to work" below.

If you select "lawful permanent resident," enter your 7- to 9-digit Alien Registration Number (A-Number), including the "A," or USCIS Number in the space provided. When completing this field using a computer, use the dropdown provided to indicate whether you have entered an Alien Number or a USCIS Number. At this time, the USCIS Number is the same as the A-Number without the "A" prefix.

- 4. An alien authorized to work:** An individual who is not a citizen or national of the United States, or a lawful permanent resident, but is authorized to work in the United States.

If you select this box, enter the date that your employment authorization expires, if any, in the space provided. In most cases, your employment authorization expiration date is found on the document(s) evidencing your employment authorization. Refugees, asylees and certain citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, or Palau, and other aliens whose employment authorization does not have an expiration date should enter N/A in the Expiration Date field. In some cases, such as if you have Temporary Protected Status, your employment authorization may have been automatically extended; in these cases, you should enter the expiration date of the automatic extension in this space.

Aliens authorized to work must enter one of the following to complete Section 1:

1. Alien Registration Number (A-Number)/USCIS Number; or
2. Form I-94 Admission Number; or
3. Foreign Passport Number and the Country of Issuance.

Your employer may not ask you to present the document from which you supplied this information.

**Alien Registration Number/USCIS Number:** Enter your 7- to 9-digit Alien Registration Number (A-Number), including the "A," or your USCIS Number in this field. At this time, the USCIS Number is the same as your A-Number without the "A" prefix. When completing this field using a computer, use the dropdown provided to indicate whether you have entered an Alien Number or a USCIS Number. If you do not provide an A-Number or USCIS Number, enter N/A in this field then enter either a Form I-94 Admission Number, or a Foreign Passport and Country of Issuance in the fields provided.

**Form I-94 Admission Number:** Enter your 11-digit I-94 Admission Number in this field. If you do not provide an I-94 Admission Number, enter N/A in this field, then enter either an Alien Registration Number/USCIS Number or a Foreign Passport Number and Country of Issuance in the fields provided.

**Foreign Passport Number:** Enter your Foreign Passport Number in this field. If you do not provide a Foreign Passport Number, enter N/A in this field, then enter either an Alien Number/USCIS Number or a I-94 Admission Number in the fields provided.

**Country of Issuance:** If you entered your Foreign Passport Number, enter your Foreign Passport's Country of Issuance. If you did not enter your Foreign Passport Number, enter N/A.

**Signature of Employee:** After completing Section 1, sign your name in this field. If you used a form obtained from the USCIS website, you must print the form to sign your name in this field. By signing this form, you attest under penalty of perjury (28 U.S.C. § 1746) that the information you provided, along with the citizenship or immigration status you selected, and all information and documentation you provide to your employer, is complete, true and correct, and you are aware that you may face severe penalties provided by law and may be subject to criminal prosecution for knowingly and willfully making false statements or using false documentation when completing this form. Further, falsely attesting to U.S. citizenship may subject employees to penalties, removal proceedings and may adversely affect an employee's ability to seek future immigration benefits. If you cannot sign your name, you may place a mark in this field to indicate your signature. Employees who use a preparer or translator to help them complete the form must still sign or place a mark in the Signature of Employee field on the printed form.

If you used a preparer, translator, and other individual to assist you in completing Form I-9:

- Both you and your preparer(s) and/or translator(s) must complete the appropriate areas of Section 1, and then sign Section 1. If Section 1 was completed on a form obtained from the USCIS website, the form must be printed to sign these fields. You and your preparer(s) and/or translator(s) also should review the instructions for **Completing the Preparer and/or Translator Certification** below.
- If the employee is a minor (individual under 18) who cannot present an identity document, the employee's parent or legal guardian can complete Section 1 for the employee and enter "minor under age 18" in the signature field. If Section 1 was completed on a form obtained from the USCIS website, the form must be printed to enter this information. The minor's parent or legal guardian should review the instructions for Completing the Preparer and/or Translator Certification below. Refer to the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#) for more guidance on completion of Form I-9 for minors. If the minor's employer participates in E-Verify, the employee must present a list B identity document with a photograph to complete Form I-9.
- If the employee is a person with a disability (who is placed in employment by a nonprofit organization, association or as part of a rehabilitation program) who cannot present an identity document, the employee's parent, legal guardian or a representative of the nonprofit organization, association or rehabilitation program can complete Section 1 for the employee and enter "Special Placement" in this field. If Section 1 was completed on a form obtained from the USCIS website, the form must be printed to enter this information. The parent, legal guardian or representative of the nonprofit organization, association or rehabilitation program completing Section 1 for the employee should review the instructions for Completing the Preparer and/or Translator Certification below. Refer to the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#) for more guidance on completion of Form I-9 for certain employees with disabilities.

**Today's Date:** Enter the date you signed Section 1 in this field. Do not backdate this field. Enter the date as a 2-digit month, 2-digit day and 4-digit year (mm/dd/yyyy). For example, enter January 8, 2014 as 01/08/2014. A preparer or translator who assists the employee in completing Section 1 may enter the date the employee signed or made a mark to sign Section 1 in this field. Parents or legal guardians assisting minors (individuals under age 18) and parents, legal guardians or representatives of a nonprofit organization, association or rehabilitation program assisting certain employees with disabilities must enter the date they completed Section 1 for the employee.

### ***Completing the Preparer and/or Translator Certification***

If you did not use a preparer or translator to assist you in completing Section 1, you, the employee, must check the box marked **I did not use a Preparer or Translator**. If you check this box, leave the rest of the fields in this area blank.

If one or more preparers and/or translators assist the employee in completing the form using a computer, the preparer and/or translator must check the box marked "**A preparer(s) and/or translator(s) assisted the employee in completing Section 1**", then select the number of Certification areas needed from the dropdown provided. Any additional Certification areas generated will result in an additional page. [The Form I-9 Supplement](#), Section 1 Preparer and/or Translator Certification, can be separately downloaded from the USCIS Form I-9 webpage, which provides additional Certification areas for those completing Form I-9 using a computer who need more Certification areas than the 5 provided or those who are completing Form I-9 on paper. The first preparer and/or translator must complete all the fields in the Certification area on the same page the employee has signed. There is no limit to the number of preparers and/or translators an employee can use, but each additional preparer and/or translator must complete and sign a separate Certification area. Ensure the employee's last name, first name and middle initial are entered at the top of any additional pages. The employer must ensure that any additional pages are retained with the employee's completed Form I-9.

**Signature of Preparer or Translator:** Any person who helped to prepare or translate Section 1 of Form I-9 must sign his or her name in this field. If you used a form obtained from the USCIS website, you must print the form to sign your name in this field. The Preparer and/or Translator Certification must also be completed if “Individual under Age 18” or “Special Placement” is entered in lieu of the employee’s signature in Section 1.

**Today's Date:** The person who signs the Preparer and/or Translator Certification must enter the date he or she signs in this field on the printed form. Do not backdate this field. Enter the date as a 2-digit month, 2-digit day, and 4-digit year (mm/dd/yyyy). For example, enter January 8, 2014 as 01/08/2014.

**Last Name (*Family Name*):** Enter the full legal last name of the person who helped the employee in preparing or translating Section 1 in this field. The last name is also the family name or surname. If the preparer or translator has two last names or a hyphenated last name, include both names in this field.

**First Name (*Given Name*):** Enter the full legal first name of the person who helped the employee in preparing or translating Section 1 in this field. The first name is also the given name.

**Address (*Street Name and Number*):** Enter the street name and number of the current address of the residence of the person who helped the employee in preparing or translating Section 1 in this field. Addresses for residences in Canada or Mexico may be entered in this field. If the residence does not have a physical address, enter a description of the location of the residence, such as “3 miles southwest of Anytown post office near water tower.” If the residence is an apartment, enter the apartment number in this field.

**City or Town:** Enter the city, town or village of the residence of the person who helped the employee in preparing or translating Section 1 in this field. If the residence is not located in a city, town or village, enter the name of the county, township, reservation, etc., in this field. If the residence is in Canada, enter the city and province in this field. If the residence is in Mexico, enter the city and state in this field.

**State:** Enter the abbreviation of the state, territory or country of the preparer or translator’s residence in this field.

**ZIP Code:** Enter the 5-digit ZIP code of the residence of the person who helped the employee in preparing or translating Section 1 in this field. If the preparer or translator's residence is in Canada or Mexico, enter the 5- or 6-digit postal code.

### ***Presenting Form I-9 Documents***

Within 3 business days of starting work for pay, you must present to your employer documentation that establishes your identity and employment authorization. For example, if you begin employment on Monday, you must present documentation on or before Thursday of that week. However, if you were hired to work for less than 3 business days, you must present documentation no later than the first day of employment.

Choose which unexpired document(s) to present to your employer from the Lists of Acceptable Documents. An employer cannot specify which document(s) you may present from the Lists of Acceptable Documents. You may present either one selection from List A or a combination of one selection from List B and one selection from List C. Some List A documents, which show both identity and employment authorization, are combination documents that must be presented together to be considered a List A document: for example, the foreign passport together with a Form I-94 containing an endorsement of the alien’s nonimmigrant status and employment authorization with a specific employer incident to such status. List B documents show identity only and List C documents show employment authorization only. If your employer participates in E-Verify and you present a List B document, the document must contain a photograph. If you present acceptable List A documentation, you should not be asked to present, nor should you provide, List B and List C documentation. If you present acceptable List B and List C documentation, you should not be asked to present, nor should you provide, List A documentation. If you are unable to present a document(s) from these lists, you may be able to present an acceptable receipt. Refer to the Receipts section below.

Your employer must review the document(s) you present to complete Form I-9. If your document(s) reasonably appears to be genuine and to relate to you, your employer must accept the documents. If your document(s) does not reasonably appear to be genuine or to relate to you, your employer must reject it and provide you with an opportunity to present other documents from the Lists of Acceptable Documents. Your employer may choose to make copies of your document(s), but must return the original(s) to you. Your employer must review your documents in your physical presence.

Your employer will complete the other parts of this form, as well as review your entries in Section 1. Your employer may ask you to correct any errors found. Your employer is responsible for ensuring all parts of Form I-9 are properly completed and is subject to penalties under federal law if the form is not completed correctly.

Minors (individuals under age 18) and certain employees with disabilities whose parent, legal guardian or representative completed Section 1 for the employee are only required to present an employment authorization document from List C. Refer to the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#) for more guidance on minors and certain individuals with disabilities.

### ***Receipts***

If you do not have unexpired documentation from the Lists of Acceptable Documents, you may be able to present a receipt(s) in lieu of an acceptable document(s). New employees who choose to present a receipt(s) must do so within three business days of their first day of employment. If your employer is reverifying your employment authorization, and you choose to present a receipt for reverification, you must present the receipt by the date your employment authorization expires. Receipts are not acceptable if employment lasts fewer than three business days.

There are three types of acceptable receipts:

1. A receipt showing that you have applied to replace a document that was lost, stolen or damaged. You must present the actual document within 90 days from the date of hire or, in the case of reverification, within 90 days from the date your original employment authorization expires.
2. The arrival portion of Form I-94/I-94A containing a temporary I-551 stamp and a photograph of the individual. You must present the actual Permanent Resident Card (Form I-551) by the expiration date of the temporary I-551 stamp, or, if there is no expiration date, within 1 year from the date of admission.
3. The departure portion of Form I-94/I-94A with a refugee admission stamp. You must present an unexpired Employment Authorization Document (Form I-766) or a combination of a List B document and an unrestricted Social Security Card within 90 days from the date of hire or, in the case of reverification, within 90 days from the date your original employment authorization expires.

Receipts showing that you have applied for an initial grant of employment authorization, or for renewal of your expiring or expired employment authorization, are not acceptable.

## **Completing Section 2: Employer or Authorized Representative Review and Verification**

You, the employer, must ensure that all parts of Form I-9 are properly completed and may be subject to penalties under federal law if the form is not completed correctly. Section 1 must be completed no later than the employee's first day of employment. You may not ask an individual to complete Section 1 before he or she has accepted a job offer. Before completing Section 2, you should review Section 1 to ensure the employee completed it properly. If you find any errors in Section 1, have the employee make corrections, as necessary and initial and date any corrections made.

You may designate an authorized representative to act on your behalf to complete Section 2. An authorized representative can be any person you designate to complete and sign Form I-9 on your behalf. You are liable for any violations in connection with the form or the verification process, including any violations of the employer sanctions laws committed by the person designated to act on your behalf.

You or your authorized representative must complete Section 2 by examining evidence of identity and employment authorization within 3 business days of the employee's first day of employment. For example, if an employee begins employment on Monday, you must review the employee's documentation and complete Section 2 on or before Thursday of that week. However, if you hire an individual for less than 3 business days, Section 2 must be completed no later than the first day of employment.

### ***Entering Employee Information from Section 1***

This area, titled, "Employee Info from Section 1" contains fields to enter the employee's last name, first name, middle initial exactly as he or she entered them in Section 1. This area also includes a Citizenship/Immigration Status field to enter the number of the citizenship or immigration status checkbox the employee selected in Section 1. These fields help to ensure that the two pages of an employee's Form I-9 remain together. When completing Section 2 using a computer, the number entered in the Citizenship/Immigration Status field provides drop-downs that directly relate to the employee's selected citizenship or immigration status.



## ***Entering Documents the Employee Presents***

You, the employer or authorized representative, must physically examine, in the employee's physical presence, the unexpired document(s) the employee presents from the Lists of Acceptable Documents to complete the Document fields in Section 2.

You cannot specify which document(s) an employee may present from these lists. If you discriminate in the Form I-9 process based on an individual's citizenship status, immigration status, or national origin, you may be in violation of the law and subject to sanctions such as civil penalties and be required to pay back pay to discrimination victims. A document is acceptable as long as it reasonably appears to be genuine and to relate to the person presenting it. Employees must present one selection from List A or a combination of one selection from List B and one selection from List C.

List A documents show both identity and employment authorization. Some List A documents are combination documents that must be presented together to be considered a List A document, such as a foreign passport together with a Form I-94 containing an endorsement of the alien's nonimmigrant status.

List B documents show identity only, and List C documents show employment authorization only. If an employee presents a List A document, do not ask or require the employee to present List B and List C documents, and vice versa. If an employer participates in E-Verify and the employee presents a List B document, the List B document must include a photograph.

If an employee presents a receipt for the application to replace a lost, stolen or damaged document, the employee must present the replacement document to you within 90 days of the first day of work for pay, or in the case of reverification, within 90 days of the date the employee's employment authorization expired. Enter the word "Receipt" followed by the title of the receipt in Section 2 under the list that relates to the receipt.

When your employee presents the replacement document, draw a line through the receipt, then enter the information from the new document into Section 2. Other receipts may be valid for longer or shorter periods, such as the arrival portion of Form I-94/I-94A containing a temporary I-551 stamp and a photograph of the individual, which is valid until the expiration date of the temporary I-551 stamp or, if there is no expiration date, valid for one year from the date of admission.

Ensure that each document is an unexpired, original (no photocopies, except for certified copies of birth certificates) document. Certain employees may present an expired employment authorization document, which may be considered unexpired, if the employee's employment authorization has been extended by regulation or a Federal Register Notice. Refer to the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#) or [I-9 Central](#) for more guidance on these special situations.

Refer to the M-274 for guidance on how to handle special situations, such as students (who may present additional documents not specified on the Lists) and H-1B and H-2A nonimmigrants changing employers.

Minors (individuals under age 18) and certain employees with disabilities whose parent, legal guardian or representative completed Section 1 for the employee are only required to present an employment authorization document from List C. Refer to the M-274 for more guidance on minors and certain persons with disabilities. If the minor's employer participates in E-Verify, the minor employee also must present a List B identity document with a photograph to complete Form I-9.

You must return original document(s) to the employee, but may make photocopies of the document(s) reviewed. Photocopying documents is voluntary unless you participate in E-Verify. E-Verify employers are only required to photocopy certain documents. If you are an E-Verify employer who chooses to photocopy documents other than those you are required to photocopy, you should apply this policy consistently with respect to Form I-9 completion for all employees. For more information on the types of documents that an employer must photocopy if the employer uses E-Verify, visit E-Verify's website at [www.everify.gov](http://www.everify.gov). For non-E-Verify employers, if photocopies are made, they should be made consistently for ALL new hires and reverified employees.

Photocopies must be retained and presented with Form I-9 in case of an inspection by DHS or another federal government agency. You must always complete Section 2 by reviewing original documentation, even if you photocopy an employee's document(s) after reviewing the documentation. Making photocopies of an employee's document(s) cannot take the place of completing Form I-9. You are still responsible for completing and retaining Form I-9.

**List A - Identity and Employment Authorization:** If the employee presented an acceptable document(s) from List A or an acceptable receipt for a List A document, enter the document(s) information in this column. If the employee presented a List A document that consists of a combination of documents, enter information from each document in that combination in a separate area under List A as described below. All documents must be unexpired. If you enter document information in the List A column, you should not enter document information or N/A in the List B or List C columns. If you complete Section 2 using a computer, a selection in List A will fill all the fields in the Lists B and C columns with N/A.

**Document Title:** If the employee presented a document from List A, enter the title of the List A document or receipt in this field. The abbreviations provided are available in the dropdown when the form is completed on a computer. When completing the form on paper, you may choose to use these abbreviations or any other common abbreviation to enter the document title or issuing authority. If the employee presented a combination of documents, use the second and third Document Title fields as necessary.

Full name of List A Document	Abbreviations
U.S. Passport	U.S. Passport
U.S. Passport Card	U.S. Passport Card
Permanent Resident Card (Form I-551)	Perm. Resident Card (Form I-551)
Alien Registration Receipt Card (Form I-551)	Alien Reg. Receipt Card (Form I-551)
Foreign passport containing a temporary I-551 stamp	1. Foreign Passport 2. Temporary I-551 Stamp
Foreign passport containing a temporary I-551 printed notation on a machine-readable immigrant visa (MRIV)	1. Foreign Passport 2. Machine-readable immigrant visa (MRIV)
Employment Authorization Document (Form I-766)	Employment Auth. Document (Form I-766)
For a nonimmigrant alien authorized to work for a specific employer because of his or her status, a foreign passport with Form I-94/I-94A that contains an endorsement of the alien's nonimmigrant status	1. Foreign Passport, work-authorized non-immigrant 2. Form I-94/I-94A 3. Form I-20 or Form DS-2019  Note: In limited circumstances, certain J-1 students may be required to present a letter from their Responsible Officer in order to work. Enter the document title, issuing authority, document number and expiration date from this document in the Additional Information field.
Passport from the Federated States of Micronesia (FSM) with Form I-94/I-94A	1. FSM Passport with Form I-94 2. Form I-94/I-94A
Passport from the Republic of the Marshall Islands (RMI) with Form I-94/I-94A	1. RMI Passport with Form I-94 2. Form I-94/I-94A
Receipt: The arrival portion of Form I-94/I-94A containing a temporary I-551 stamp and photograph	Receipt: Form I-94/I-94A w/I-551 stamp, photo
Receipt: The departure portion of Form I-94/I-94A with an unexpired refugee admission stamp	Receipt: Form I-94/I-94A w/refugee stamp
Receipt for an application to replace a lost, stolen or damaged Permanent Resident Card (Form I-551)	Receipt replacement Perm. Res. Card (Form I-551)
Receipt for an application to replace a lost, stolen or damaged Employment Authorization Document (Form I-766)	Receipt replacement EAD (Form I-766)
Receipt for an application to replace a lost, stolen or damaged foreign passport with Form I-94/I-94A that contains an endorsement of the alien's nonimmigrant status	1. Receipt: Replacement Foreign Passport, work-authorized nonimmigrant 2. Receipt: Replacement Form I-94/I-94A 3. Form I-20 or Form DS-2019 (if presented)
Receipt for an application to replace a lost, stolen or damaged passport from the Federated States of Micronesia with Form I-94/I-94A	1. Receipt: Replacement FSM Passport with Form I-94 2. Receipt: Replacement Form I-94/I-94A
Receipt for an application to replace a lost, stolen or damaged passport from the Republic of the Marshall Islands with Form I-94/I-94A	1. Receipt: Replacement RMI Passport with Form I-94 2. Receipt: Replacement Form I-94/I-94A

**Issuing Authority:** Enter the issuing authority of the List A document or receipt. The issuing authority is the specific entity that issued the document. If the employee presented a combination of documents, use the second and third Issuing Authority fields as necessary.

**Document Number:** Enter the document number, if any, of the List A document or receipt presented. If the document does not contain a number, enter N/A in this field. If the employee presented a combination of documents, use the second and third Document Number fields as necessary. If the document presented was a Form I-20 or DS-2019, enter the Student and Exchange Visitor Information System (SEVIS) number in the third Document Number field exactly as it appears on the Form I-20 or the DS-2019.

**Expiration Date (if any) (mm/dd/yyyy):** Enter the expiration date, if any, of the List A document. The document is not acceptable if it has already expired. If the document does not contain an expiration date, enter N/A in this field. If the document uses text rather than a date to indicate when it expires, enter the text as shown on the document, such as "D/S" (which means, "duration of status"). For a receipt, enter the expiration date of the receipt validity period as described above. If the employee presented a combination of documents, use the second and third Expiration Date fields as necessary. If the document presented was a Form I-20 or DS-2019, enter the program end date here.

**List B - Identity:** If the employee presented an acceptable document from List B or an acceptable receipt for the application to replace a lost, stolen, or destroyed List B document, enter the document information in this column. If a parent or legal guardian attested to the identity of an employee who is an [individual under age 18](#) or certain [employees with disabilities](#) in Section 1, enter either "Individual under age 18" or "Special Placement" in this field. Refer to the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#) for more guidance on individuals under age 18 and certain person with disabilities.

If you enter document information in the List B column, you must also enter document information in the List C column. If an employee presents acceptable List B and List C documents, do not ask the employees to present a List A document. If you enter document information in List B, you should not enter document information or N/A in List A. If you complete Section 2 using a computer, a selection in List B will fill all the fields in the List A column with N/A.

**Document Title:** If the employee presented a document from List B, enter the title of the List B document or receipt in this field. The abbreviations provided are available in the dropdown when the form is completed on a computer. When completing the form on paper, you may choose to use these abbreviations or any other common abbreviations to document the document title or issuing authority.

Full name of List B Document	Abbreviations
Driver's license issued by a State or outlying possession of the United States	Driver's license issued by state/territory
ID card issued by a State or outlying possession of the United States	ID card issued by state/territory
ID card issued by federal, state, or local government agencies or entities (Note: This selection does not include the driver's license or ID card issued by a State or outlying possession of the United States as described in B1 of the List of Acceptable Documents.)	Government ID
School ID card with photograph	School ID
Voter's registration card	Voter registration card
U.S. Military card	U.S. Military card
U.S. Military draft record	U.S. Military draft record
Military dependent's ID card	Military dependent's ID card
U.S. Coast Guard Merchant Mariner Card	USCG Merchant Mariner card
Native American tribal document	Native American tribal document
Driver's license issued by a Canadian government authority	Canadian driver's license
School record (for persons under age 18 who are unable to present a document listed above)	School record (under age 18)
Report card (for persons under age 18 who are unable to present a document listed above)	Report card (under age 18)
Clinic record (for persons under age 18 who are unable to present a document listed above)	Clinic record (under age 18)
Doctor record (for persons under age 18 who are unable to present a document listed above)	Doctor record (under age 18)
Hospital record (for persons under age 18 who are unable to present a document listed above)	Hospital record (under age 18)
Day-care record (for persons under age 18 who are unable to present a document listed above)	Day-care record (under age 18)
Nursery school record (for persons under age 18 who are unable to present a document listed above)	Nursery school record (under age 18)

Full name of List B Document	Abbreviations
Individual under age 18 endorsement by parent or guardian	Individual under Age 18
Special placement endorsement for persons with disabilities	Special Placement
Receipt for the application to replace a lost, stolen or damaged Driver's License issued by a State or outlying possession of the United States	Receipt: Replacement driver's license
Receipt for the application to replace a lost, stolen or damaged ID card issued by a State or outlying possession of the United States	Receipt: Replacement ID card
Receipt for the application to replace a lost, stolen or damaged ID card issued by federal, state, or local government agencies or entities	Receipt: Replacement Gov't ID
Receipt for the application to replace a lost, stolen or damaged School ID card with photograph	Receipt: Replacement School ID
Receipt for the application to replace a lost, stolen or damaged Voter's registration card	Receipt: Replacement Voter reg. card
Receipt for the application to replace a lost, stolen or damaged U.S. Military card	Receipt: Replacement U.S. Military card
Receipt for the application to replace a lost, stolen or damaged Military dependent's ID card	Receipt: Replacement U.S. Military dep. card
Receipt for the application to replace a lost, stolen or damaged U.S. Military draft record	Receipt: Replacement Military draft record
Receipt for the application to replace a lost, stolen or damaged U.S. Coast Guard Merchant Mariner Card	Receipt: Replacement Merchant Mariner card
Receipt for the application to replace a lost, stolen or damaged Driver's license issued by a Canadian government authority	Receipt: Replacement Canadian DL
Receipt for the application to replace a lost, stolen or damaged Native American tribal document	Receipt: Replacement Native American tribal doc
Receipt for the application to replace a lost, stolen or damaged School record (for persons under age 18 who are unable to present a document listed above)	Receipt: Replacement School record (under age 18)
Receipt for the application to replace a lost, stolen or damaged Report card (for persons under age 18 who are unable to present a document listed above)	Receipt: Replacement Report card (under age 18)
Receipt for the application to replace a lost, stolen or damaged Clinic record (for persons under age 18 who are unable to present a document listed above)	Receipt: Replacement Clinic record (under age 18)
Receipt for the application to replace a lost, stolen or damaged Doctor record (for persons under age 18 who are unable to present a document listed above)	Receipt: Replacement Doctor record (under age 18)
Receipt for the application to replace a lost, stolen or damaged Hospital record (for persons under age 18 who are unable to present a document listed above)	Receipt: Replacement Hospital record (under age 18)
Receipt for the application to replace a lost, stolen or damaged Day-care record (for persons under age 18 who are unable to present a document listed above)	Receipt: Replacement Day-care record (under age 18)
Receipt for the application to replace a lost, stolen or damaged Nursery school record (for persons under age 18 who are unable to present a document listed above)	Receipt: Replacement Nursery school record (under age 18)

**Issuing Authority:** Enter the issuing authority of the List B document or receipt. The issuing authority is the entity that issued the document. If the employee presented a document that is issued by a state agency, include the state as part of the issuing authority.

**Document Number:** Enter the document number, if any, of the List B document or receipt exactly as it appears on the document. If the document does not contain a number, enter N/A in this field.

**Expiration Date (if any) (mm/dd/yyyy):** Enter the expiration date, if any, of the List B document. The document is not acceptable if it has already expired. If the document does not contain an expiration date, enter N/A in this field. For a receipt, enter the expiration date of the receipt validity period as described in the Receipt section above.

**List C - Employment Authorization:** If the employee presented an acceptable document from List C, or an acceptable receipt for the application to replace a lost, stolen, or destroyed List C document, enter the document information in this column. If you enter document information in the List C column, you must also enter document information in the List B column. If an employee presents acceptable List B and List C documents, do not ask the employee to present a list A document. If you enter document information in List C, you should not enter document information or N/A in List A. If you complete Section 2 using a computer, a selection in List C will fill all the fields in the List A column with N/A.

**Document Title:** If the employee presented a document from List C, enter the title of the List C document or receipt in this field. The abbreviations provided are available in the dropdown when the form is completed on a computer. When completing the form on paper, you may choose to use these abbreviations or any other common abbreviations to document the document title or issuing authority. If you are completing the form on a computer, and you select an Employment authorization document issued by DHS, the field will populate with List C #7 and provide a space for you to enter a description of the documentation the employee presented. Refer to the M-274 for guidance on entering List C #7 documentation.

Full name of List C Document	Abbreviations
Social Security Account Number card without restrictions	(Unrestricted) Social Security Card
Certification of Birth Abroad (Form FS-545)	Form FS-545
Certification of Report of Birth (Form DS-1350)	Form DS-1350
Consular Report of Birth Abroad (Form FS-240)	Form FS-240
Original or certified copy of a U.S. birth certificate bearing an official seal	Birth Certificate
Native American tribal document	Native American tribal document
U.S. Citizen ID Card (Form I-197)	Form I-197
Identification Card for use of Resident Citizen in the United States (Form I-179)	Form I-179
<a href="#">Employment authorization document issued by DHS (List C #7)</a> (Note: This selection does not include the Employment Authorization Document (Form I-766) from List A.)	Employment Auth. document (DHS) List C #7
Receipt for the application to replace a lost, stolen or damaged Social Security Account Number Card without restrictions	Receipt: Replacement Unrestricted SS Card
Receipt for the application to replace a lost, stolen or damaged Original or certified copy of a U.S. birth certificate bearing an official seal	Receipt: Replacement Birth Certificate
Receipt for the application to replace a lost, stolen or damaged Native American Tribal Document	Receipt: Replacement Native American Tribal Doc.
Receipt for the application to replace a lost, stolen or damaged Employment Authorization Document issued by DHS	Receipt: Replacement Employment Auth. Doc. (DHS)

**Issuing Authority:** Enter the issuing authority of the List C document or receipt. The issuing authority is the entity that issued the document.

**Document Number:** Enter the document number, if any, of the List C document or receipt exactly as it appears on the document. If the document does not contain a number, enter N/A in this field.

**Expiration Date (if any) (mm/dd/yyyy):** Enter the expiration date, if any, of the List C document. The document is not acceptable if it has already expired, unless USCIS has extended the expiration date on the document. For instance, if a conditional resident presents a Form I-797 extending his or her conditional resident status with the employee's expired Form I-551, enter the future expiration date as indicated on the Form I-797. If the document has no expiration date, enter N/A in this field. For a receipt, enter the expiration date of the receipt validity period as described in the Receipt section above.

**Additional Information:** Use this space to notate any additional information required for Form I-9 such as:

- Employment authorization extensions for Temporary Protected Status beneficiaries, F-1 OPT STEM students, CAP-GAP, H-1B and H-2A employees continuing employment with the same employer or changing employers, and other nonimmigrant categories that may receive extensions of stay
- Additional document(s) that certain nonimmigrant employees may present
- Discrepancies that E-Verify employers must notate when participating in the IMAGE program
- Employee termination dates and form retention dates
- E-Verify case number, which may also be entered in the margin or attached as a separate sheet per E-Verify requirements and your chosen business process
- Any other comments or notations necessary for the employer's business process

You may leave this field blank if the employee's circumstances do not require additional notations.

## ***Entering Information in the Employer Certification***

**Employee's First Day of Employment:** Enter the employee's first day of employment as a 2-digit month, 2-digit day and 4-digit year (mm/dd/yyyy).

**Signature of Employer or Authorized Representative:** Review the form for accuracy and completeness. The person who physically examines the employee's original document(s) and completes Section 2 must sign his or her name in this field. If you used a form obtained from the USCIS website, you must print the form to sign your name in this field. By signing Section 2, you attest under penalty of perjury (28 U.S.C. § 1746) that you have physically examined the documents presented by the employee, the document(s) reasonably appear to be genuine and to relate to the employee named, that to the best of your knowledge the employee is authorized to work in the United States, that the information you entered in Section 2 is complete, true and correct to the best of your knowledge, and that you are aware that you may face severe penalties provided by law and may be subject to criminal prosecution for knowingly and willfully making false statements or knowingly accepting false documentation when completing this form.

**Today's Date:** The person who signs Section 2 must enter the date he or she signed Section 2 in this field. Do not backdate this field. If you used a form obtained from the USCIS website, you must print the form to write the date in this field. Enter the date as a 2-digit month, 2-digit day and 4-digit year (mm/dd/yyyy). For example, enter January 8, 2014 as 01/08/2014.

**Title of Employer or Authorized Representative:** Enter the title, position or role of the person who physically examines the employee's original document(s), completes and signs Section 2.

**Last Name of the Employer or Authorized Representative:** Enter the full legal last name of the person who physically examines the employee's original documents, completes and signs Section 2. Last name refers to family name or surname. If the person has two last names or a hyphenated last name, include both names in this field.

**First Name of the Employer or Authorized Representative:** Enter the full legal first name of the person who physically examines the employee's original documents, completes, and signs Section 2. First name refers to the given name.

**Employer's Business or Organization Name:** Enter the name of the employer's business or organization in this field.

**Employer's Business or Organization Address (*Street Name and Number*):** Enter an actual, physical address of the employer. If your company has multiple locations, use the most appropriate address that identifies the location of the employer. Do not provide a P.O. Box address.

**City or Town:** Enter the city or town for the employer's business or organization address. If the location is not a city or town, you may enter the name of the village, county, township, reservation, etc, that applies.

**State:** Enter the two-character abbreviation of the state for the employer's business or organization address.

**ZIP Code:** Enter the 5-digit ZIP code for the employer's business or organization address.

## **Completing Section 3: Reverification and Rehires**

Section 3 applies to both reverification and rehires. When completing this section, you must also complete the Last Name, First Name and Middle Initial fields in the Employee Info from Section 1 area at the top of Section 2, leaving the Citizenship/Immigration Status field blank. When completing Section 3 in either a reverification or rehire situation, if the employee's name has changed, record the new name in Block A.

### **Reverification**

Reverification in Section 3 must be completed prior to the earlier of:

- The expiration date, if any, of the employment authorization stated in Section 1, or
- The expiration date, if any, of the List A or List C employment authorization document recorded in Section 2 (with some exceptions listed below).

Some employees may have entered "N/A" in the expiration date field in Section 1 if they are aliens whose employment authorization does not expire, e.g. asylees, refugees, certain citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, or Palau. Reverification does not apply for such employees unless they choose to present evidence of employment authorization in Section 2 that contains an expiration date and requires reverification, such as Form I-766, Employment Authorization Document.

You should not reverify U.S. citizens and noncitizen nationals, or lawful permanent residents (including conditional residents) who presented a Permanent Resident Card (Form I-551). Reverification does not apply to List B documents.

For reverification, an employee must present an unexpired document(s) (or a receipt) from either List A or List C showing he or she is still authorized to work. You CANNOT require the employee to present a particular document from List A or List C. The employee is also not required to show the same type of document that he or she presented previously. See specific instructions on how to complete Section 3 below.

## Rehires

If you rehire an employee within three years from the date that the Form I-9 was previously executed, you may either rely on the employee's previously executed Form I-9 or complete a new Form I-9.

If you choose to rely on a previously completed Form I-9, follow these guidelines.

- If the employee remains employment authorized as indicated on the previously executed Form I-9, the employee does not need to provide any additional documentation. Provide in Section 3 the employee's rehire date, any name changes if applicable, and sign and date the form.
- If the previously executed Form I-9 indicates that the employee's employment authorization from Section 1 or employment authorization documentation from Section 2 that is subject to reverification has expired, then reverification of employment authorization is required in Section 3 in addition to providing the rehire date. If the previously executed Form I-9 is not the current version of the form, you must complete Section 3 on the current version of the form.
- If you already used Section 3 of the employee's previously executed Form I-9, but are rehiring the employee within three years of the original execution of Form I-9, you may complete Section 3 on a new Form I-9 and attach it to the previously executed form.

Employees rehired after three years of original execution of the Form I-9 must complete a new Form I-9.

Complete each block in Section 3 as follows:

**Block A - New Name:** If an employee who is being reverified or rehired has also changed his or her name since originally completing Section 1 of this form, complete this block with the employee's new name. Enter only the part of the name that has changed, for example: if the employee changed only his or her last name, enter the last name in the Last Name field in this Block, then enter N/A in the First Name and Middle Initial fields. If the employee has not changed his or her name, enter N/A in each field of Block A.

**Block B - Date of Rehire:** Complete this block if you are rehiring an employee within three years of the date Form I-9 was originally executed. Enter the date of rehire in this field. Enter N/A in this field if the employee is not being rehired.

**Block C -** Complete this block if you are reverifying expiring or expired employment authorization or employment authorization documentation of a current or rehired employee. Enter the information from the List A or List C document(s) (or receipt) that the employee presented to reverify his or her employment authorization. All documents must be unexpired.

**Document Title:** Enter the title of the List A or C document (or receipt) the employee has presented to show continuing employment authorization in this field.

**Document Number:** Enter the document number, if any, of the document you entered in the Document Title field exactly as it appears on the document. Enter N/A if the document does not have a number.

**Expiration Date (if any) (mm/dd/yyyy):** Enter the expiration date, if any, of the document you entered in the Document Title field as a 2-digit month, 2-digit day, and 4-digit year (mm/dd/yyyy). If the document does not contain an expiration date, enter N/A in this field.

**Signature of Employer or Authorized Representative:** The person who completes Section 3 must sign in this field. If you used a form obtained from the USCIS website, you must print Section 3 of the form to sign your name in this field. By signing Section 3, you attest under penalty of perjury (28 U.S.C. §1746) that you have examined the documents presented by the employee, that the document(s) reasonably appear to be genuine and to relate to the employee named, that to the best of your knowledge the employee is authorized to work in the United States, that the information you entered in Section 3 is complete, true and correct to the best of your knowledge, and that you are aware that you may face severe penalties provided by law and may be subject to criminal prosecution for knowingly and willfully making false statements or knowingly accepting false documentation when completing this form.

**Today's Date:** The person who completes Section 3 must enter the date Section 3 was completed and signed in this field. Do not backdate this field. If you used a form obtained from the USCIS website, you must print Section 3 of the form to enter the date in this field. Enter the date as a 2-digit month, 2-digit day, and 4-digit year (mm/dd/yyyy). For example, enter January 8, 2014 as 01/08/2014.

**Name of Employer or Authorized Representative:** The person who completed, signed and dated Section 3 must enter his or her name in this field.

### **What is the Filing Fee?**

There is no fee for completing Form I-9. This form is not filed with USCIS or any government agency. Form I-9 must be retained by the employer and made available for inspection by U.S. Government officials as specified in the "DHS Privacy Notice" below.

### **USCIS Forms and Information**

For additional guidance about Form I-9, employers and employees should refer to the *Handbook for Employers: Guidance for Completing Form I-9 (M-274)* or USCIS' Form I-9 website at <https://www.uscis.gov/i-9-central>.

You can also obtain information about Form I-9 by e-mailing USCIS at [I-9Central@dhs.gov](mailto:I-9Central@dhs.gov), or by calling 1-888-464-4218 or 1-877-875-6028 (TTY).

You may download and obtain the English and Spanish versions of Form I-9, the *Handbook for Employers*, or the instructions to Form I-9 from the USCIS website at <https://www.uscis.gov/i-9>. To complete Form I-9 on a computer, you will need the latest version of Adobe Reader, which can be downloaded for free at <http://get.adobe.com/reader/>. You may order paper forms at <https://www.uscis.gov/forms/forms-by-mail> or by contacting the USCIS Contact Center at 1-800-375-5283 or 1-800-767-1833 (TTY).

Information about E-Verify, a web-based system that allows employers to confirm the eligibility of their employees to work in the United States, can be obtained at <https://www.e-verify.gov> or by contacting E-Verify at <https://www.e-verify.gov/contact-us>.

Employees with questions about Form I-9 and/or E-Verify can reach the USCIS employee hotline by calling 1-888-897-7781 or 1-877-875-6028 (TTY).

### **Photocopying Blank and Completed Forms I-9 and Retaining Completed Forms I-9**

Employers may photocopy or print blank Forms I-9 for future use. All pages of the instructions and Lists of Acceptable Documents must be available, either in print or electronically, to all employees completing this form. Employers must retain each employee's completed Form I-9 for as long as the individual works for the employer and for a specified period after employment has ended. Employers are required to retain the pages of the form on which the employee and employer entered data. If copies of documentation presented by the employee are made, those copies must also be retained. Once the individual's employment ends, the employer must retain this form and attachments for either 3 years after the date of hire (i.e., first day of work for pay) or 1 year after the date employment ended, whichever is later. In the case of recruiters or referrers for a fee (only applicable to those that are agricultural associations, agricultural employers, or farm labor contractors), the retention period is 3 years after the date of hire (i.e., first day of work for pay).

Forms I-9 obtained from the USCIS website that are not printed and signed manually (by hand) are not considered complete. In the event of an inspection, retaining incomplete forms may make you subject to fines and penalties associated with incomplete forms.

Employers should ensure that information employees provide on Form I-9 is used only for Form I-9 purposes. Completed Forms I-9 and all accompanying documents should be stored in a safe, secure location.

Form I-9 may be generated, signed, and retained electronically, in compliance with Department of Homeland Security regulations at 8 CFR 274a.2.



## DHS Privacy Notice

**AUTHORITIES:** The information requested on this form, and the associated documents, are collected under the Immigration Reform and Control Act of 1986, Pub. L. 99-603 (8 USC 1324a).

**PURPOSE:** The primary purpose for providing the requested information on this form is for employers to verify your identity and employment authorization. Consistent with the requirements of the Immigration Reform and Control Act of 1986, employers use the Form I-9 to document the verification of the identity and employment authorization for new employees to prevent the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States. This form is completed by both the employer and employee, and is ultimately retained by the employer.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may result in termination of employment. Failure of the employer to ensure proper completion of this form may result in the imposition of civil or criminal penalties against the employer. In addition, knowingly employing individuals who are not authorized to work in the United States may subject the employer to civil and/or criminal penalties.

**ROUTINE USES:** This information will be used by employers as a record of their basis for determining eligibility of an individual to work in the United States. The employer must retain this completed form and make it available for inspection by authorized officials of the Department of Homeland Security, Department of Labor, and Department of Justice, Civil Rights Division, Immigrant and Employee Rights Section. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

## Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 35 minutes per response, when completing the form manually, and 26 minutes per response when using a computer to aid in completion of the form, including the time for reviewing instructions and completing and retaining the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue NW, Washington, DC 20529-2140; OMB No. 1615-0047. **Do not mail your completed Form I-9 to this address.**

# 6

- **Corporate  
Immigration  
Compliance Officer  
Designation**
- **List of Authorized I-9  
Administrators**

## Sample List of Authorized Personnel

### ▪ WHAT IS THIS?

This a *Sample* List of Authorized Personnel, which shows who is authorized to act as an I-9 Administrator, in-house I-9 Auditor, and Immigration Compliance Officer. The key feature of the List is making authorization available only to personnel received appropriate immigration compliance training within previous year.

### ▪ HOW TO USE THIS

Review the List of Authorized Personnel, if it is a good fit for your company, adopt and maintain it to ensure proper authorization of all personnel involved in immigration compliance matters.

#### NOTES:

EMPLOYER \_\_\_\_\_

## **LIST OF AUTHORIZED PERSONNEL**

**Only these trained employees are duly authorized, on behalf of the Employer, to:**

1. Fill out I-9s and conduct E-Verify queries
2. Maintain I-9 and E-Verify records
3. Re-verify I-9s and update the I-9 Re-verification Table
4. Enter information into the I-9 Destruction Table
5. Destroy I-9s
6. Maintain contractor certification records
7. Lead investigations of possible IRCA violations (both unauthorized employment and prohibited discrimination)
8. Direct company immigration compliance efforts and update company's policies and procedures

Authorized Personnel receive immigration compliance training at least once a year, and have access to legal assistance on immigration compliance issues if there are additional questions.



## TABLE OF AUTHORIZED PERSONNEL

	Authorized Person (Name)	Authorized As	Date of Last Training	Authorized by and Signature	Authorization Termination Date <i>(if applicable)</i>
<b>3</b>		<input type="checkbox"/> Immigration Compliance Officer	_____, 20__ _____, 20__		_____, 20__ _____, 20__
		<input type="checkbox"/> I-9 Administrator	_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__		_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__
<b>4</b>		<input type="checkbox"/> Immigration Compliance Officer	_____, 20__ _____, 20__		_____, 20__ _____, 20__
		<input type="checkbox"/> I-9 Administrator	_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__		_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__

## TABLE OF AUTHORIZED PERSONNEL

	Authorized Person (Name)	Authorized As	Date of Last Training	Authorized by and Signature	Authorization Termination Date <i>(if applicable)</i>
<b>5</b>		<input type="checkbox"/> Immigration Compliance Officer	_____, 20__ _____, 20__		_____, 20__ _____, 20__
		<input type="checkbox"/> I-9 Administrator	_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__		_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__
<b>6</b>		<input type="checkbox"/> Immigration Compliance Officer	_____, 20__ _____, 20__		_____, 20__ _____, 20__
		<input type="checkbox"/> I-9 Administrator	_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__		_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__

## TABLE OF AUTHORIZED PERSONNEL

	Authorized Person (Name)	Authorized As	Date of Last Training	Authorized by and Signature	Authorization Termination Date <i>(if applicable)</i>
7		<input type="checkbox"/> Immigration Compliance Officer	_____, 20__ _____, 20__		_____, 20__ _____, 20__
		<input type="checkbox"/> I-9 Administrator	_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__		_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__
8		<input type="checkbox"/> Immigration Compliance Officer	_____, 20__ _____, 20__		_____, 20__ _____, 20__
		<input type="checkbox"/> I-9 Administrator	_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__		_____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__



## TABLE OF AUTHORIZED PERSONNEL

	Authorized Person (Name)	Authorized As	Date of Last Training	Authorized by and Signature	Authorization Termination Date (if applicable)
<b>9</b>		<input type="checkbox"/> Immigration Compliance Officer  <input type="checkbox"/> I-9 Administrator	_____, 20__ _____, 20__  _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__		_____, 20__ _____, 20__  _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__
<b>10</b>		<input type="checkbox"/> Immigration Compliance Officer  <input type="checkbox"/> I-9 Administrator	_____, 20__ _____, 20__  _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__		_____, 20__ _____, 20__  _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__ _____, 20__

EMPLOYER \_\_\_\_\_

## Immigration Compliance Officer Authorization

1. \_\_\_\_\_ is hereby appointed as the Company's  
NAME **Immigration Compliance Officer**  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Date of Authorization  
\_\_\_\_\_  
Date of Last Training  
\_\_\_\_\_  
Date Authorization Terminated (if applicable)

2. \_\_\_\_\_ is hereby appointed as the Company's  
NAME **Immigration Compliance Officer**  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Date of Authorization  
\_\_\_\_\_  
Date of Last Training  
\_\_\_\_\_  
Date Authorization Terminated (if applicable)

3. \_\_\_\_\_ is hereby appointed as the Company's  
NAME **Immigration Compliance Officer**  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Date of Authorization  
\_\_\_\_\_  
Date of Last Training  
\_\_\_\_\_  
Date Authorization Terminated (if applicable)

4. \_\_\_\_\_ is hereby appointed as the Company's  
NAME **Immigration Compliance Officer**  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Date of Authorization  
\_\_\_\_\_  
Date of Last Training  
\_\_\_\_\_  
Date Authorization Terminated (if applicable)

5. \_\_\_\_\_ is hereby appointed as the Company's  
NAME **Immigration Compliance Officer**  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Date of Authorization  
\_\_\_\_\_  
Date of Last Training  
\_\_\_\_\_  
Date Authorization Terminated (if applicable)

6. \_\_\_\_\_ is hereby appointed as the Company's  
NAME **Immigration Compliance Officer**  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Date of Authorization  
\_\_\_\_\_  
Date of Last Training  
\_\_\_\_\_  
Date Authorization Terminated (if applicable)

# 7

- **Internal I-9 Audit Procedures**
- **Audit Schedule**
- **Audit Reports**

## Annual Internal I-9 Audits

### ▪ WHAT IS THIS?

The Ten Steps of the Annual Internal I-9 Audit Process is an explanation of how an employer can undergo the audit. It is followed by a sample I-9 Audit Sheet, I-9 Preliminary Audit Report, training samples of I-9 Audit Sheets and a Audit Progress Audit Report, and a sample I-9 Audit Schedule.

### ▪ HOW TO USE THIS

Review the ten steps, and sample Audit Sheets, Audit Reports and Audit Schedule. If this is a good fit for your company, use the process and samples to conduct I-9 self-audits.

### NOTES:

## WHO DOES WHAT IN THE I-9 PROCESS

### CORPORATE IMMIGRATION COMPLIANCE OFFICER

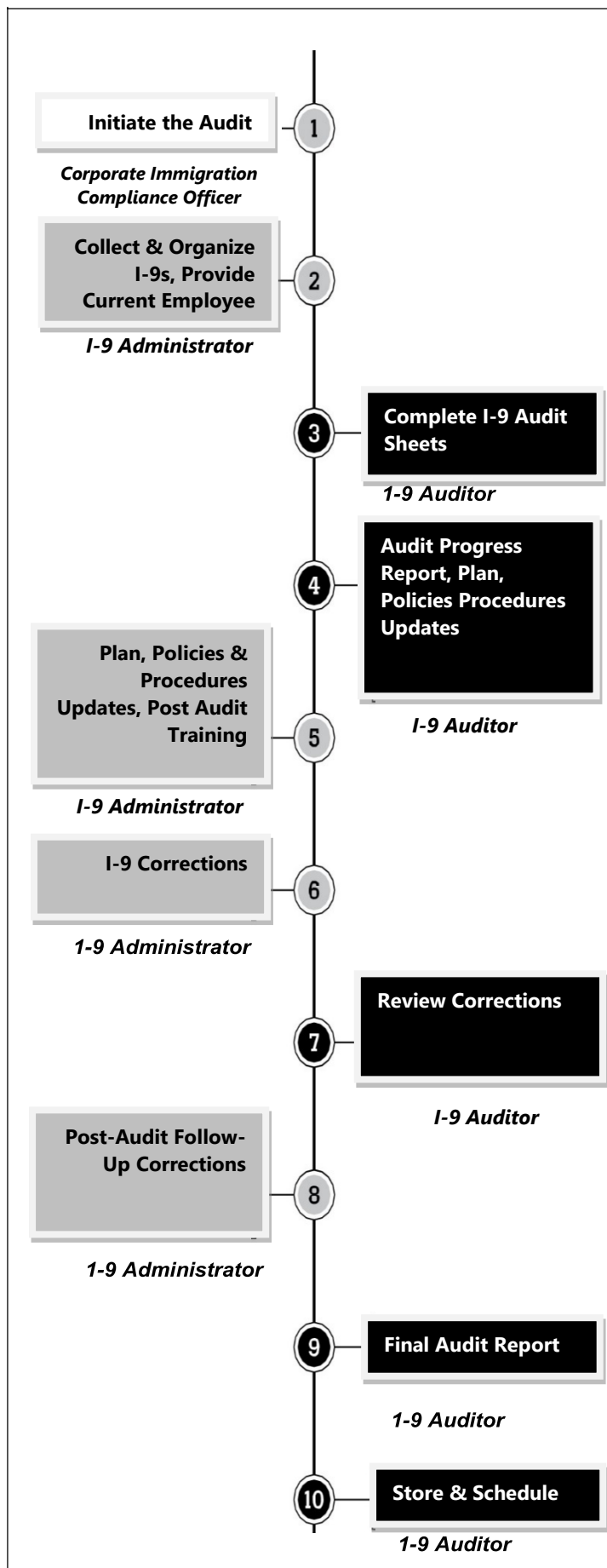
- Establishes and maintains Corporate Immigration Compliance Plan, Policies, and Procedures
- Receives training
- Schedules audits and training for I-9 Administrators

### THE I-9 ADMINISTRATOR

- Completes and stores I-9s
- Assists I-9 Auditor with collecting I-9s and supporting documentation and a list of current employees
- Makes corrections as suggested on I-9 Audit and Review of Corrections

### THE I-9 AUDITOR

- Prepares I-9 for the Audit.
- Reviews I-9s and fills out the I-9 Audit and review sheets and updates Employer Compliance Policies and Procedures
- Writes Audit Progress & Final Audit Reports, makes sure corrections are made by I-9 Administrator as directed by I-9 Audit and Review sheets.
- Recommends training on I-9 completion and changes to Employer Immigration Compliance Policies and Procedures, trains I-9 Administrator(s).
- Stores I-9 Audit records and schedules next I-9 audits.



# THE TEN STEPS OF THE ANNUAL INTERNAL I-9 AUDIT

## **Step One: Initiate the Audit**

Corporate Immigration Compliance Officer arranges with external auditors to conduct an internal audit of all un-audited employee I-9s.

## **Step Two: Collect & Organize I-9s, Provide List of Current Employees**

Collect the I-9s and supporting documents. Organize them in alphabetical order. Obtain a list of all current employees.

## **Step Three: I-9 Audit Sheets**

Review I-9s and complete I-9 Audit Sheet.

## **Step Four: Audit Progress Report**

Write I-9 Audit Report, summarize repeated errors, point out trends, recommend necessary I-9 corrections, updates to Employer Immigration Compliance Plan, Policies and Procedures, and recommend training for I-9 Administrators.

## **Step Five: Post-Audit Training & Employer Immigration Compliance Plan, Policies & Procedures Update**

Train I-9 Administrators on issues noted in the Preliminary Audit Report and Updated Employer Compliance Plan, Policies and Procedures, if necessary.

## **Step Six: Corrections**

I-9 Administrators should make corrections as noted on the I-9 Audit Sheet.

## **Step Seven: Review After Corrections**

When I-9 Administrators complete corrections, review the corrected I-9s to make sure that all corrections are properly made. Complete the I-9 Follow-Up Corrections on any remaining items, train I-9 Administrators and oversee corrections until they are completed.

## **Step Eight: Post Review Corrections (Again!)**

I-9 Administrators should make corrections as noted on the follow-up corrections notes.

## **Step Nine: Final Audit Report**

Prepare Final Audit Report.

## **Step Ten: Store and Schedule Next Audit**

Store I-9 Audit Records per Employer's Procedures and schedule your next Annual I-9 Self-Audit.

**I-9 Audit Schedule and Record**  
**I-9 audits should be conducted every twelve (12) months.**

**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---

**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---

**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---

**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---

**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---



**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---

**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---

**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---

**20\_\_ Audit Performed On \_\_\_\_\_, 20\_\_**

DATE

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

---

Company Name  
Date  
Conducted By

# Sample

## I-9 AUDIT SHEET

EMPLOYEE'S NAME \_\_\_\_\_

DATE OF HIRE \_\_\_\_\_ ID (if applicable) \_\_\_\_\_

### AUDIT NOTES [To be completed by the I-9 Auditor]:

#### PROBLEM 1:

---

---

#### HOW TO ADDRESS PROBLEM 1:

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### PROBLEM RESOLVED [To be completed by the I-9 Administrator]

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Company Name  
Date  
Conducted By

## Sample **I-9 AUDIT SHEET** *(continued)*

**PROBLEM 2:**

---

---

**HOW TO ADDRESS PROBLEM 2:**

---

---

---

**PROBLEM RESOLVED** [To be completed by the I-9 Administrator]

Signature

Title

Name

Date

**PROBLEM 3:**

---

---

**HOW TO ADDRESS PROBLEM 3:**

---

---

---

**PROBLEM RESOLVED** [To be completed by the I-9 Administrator]

Signature

Title

Name

Date

Company Name  
Date  
Conducted By

## Sample I-9 AUDIT SHEET *(continued)*

**PROBLEM 4:**

---

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**HOW TO ADDRESS PROBLEM 4:**

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---

---

**PROBLEM RESOLVED** [To be completed by the I-9 Administrator]

---

Signature

Title

---

Name

Date

**PROBLEM 5:**

---

---

**HOW TO ADDRESS PROBLEM 5:**

---

---

---

**PROBLEM RESOLVED** [To be completed by the I-9 Administrator]

---

Signature

Title

---

Name

Date

**Confidential**

ATTORNEY-CLIENT PRIVILEGED COMMUNICATION

Attorney Work Product

*Sample*  
**I-9 AUDIT PROGRESS  
REPORT**

I-9 Audit

---

Date

Audit Conducted By

**CONFIDENTIAL**

ATTORNEY-CLIENT PRIVILEGED COMMUNICATION

Attorney Work Product

*Sample*  
**FINAL I-9  
AUDIT REPORT**

I-9 Audit

---

Date

Audit Conducted By

# 8

## **Procedures for Reporting and Investigating Allegations of IRCA Violations**

# PROCEDURES FOR REPORTING AND INVESTIGATING ALLEGATIONS OF UNAUTHORIZED EMPLOYMENT AND/OR PROHIBITED DISCRIMINATION

1. Any Employee may report allegations of unauthorized employment or prohibited discrimination to any supervisor or manager. We have an open-door policy.
2. If an allegation is made, the supervisor or manager should report to the Company's Immigration Compliance Officer within 48 hours.
3. Once a report is made, the Immigration Compliance Officer must investigate and make a written report and recommendations for action required, if any, within 14 days. If the investigation appears complex, the Company's Immigration Compliance Officer should contact the company's Attorney.



# 9

## **Contractor Immigration Compliance Procedures**

# Contractor Immigration Compliance

## ▪ WHAT IS THIS?

This is a Contractor Immigration Compliance Protocol followed by a Contractor Immigration Compliance Certification Forms and a Contractor Immigration Compliance Schedule.

## ▪ HOW TO USE THIS

Review the policy and the forms, decide whether they are a good fit for your company, and adopt them if appropriate as part of your Compliance Plan, Policies and Procedures.  
Conduct training.

## NOTES:

COMPANY NAME \_\_\_\_\_

## **CONTRACTOR IMMIGRATION COMPLIANCE PROTOCOL**

I-9 or E-Verify procedures cannot be used to verify employment eligibility of contractors or subcontractors. However, the law prohibits using contractors if the employer knows they are not authorized to work in the United States. Since we are unable to verify whether or not they are authorized to work in the U.S. through the I-9 and E-Verify process. We will follow ICE Best Employment Practices, (the so-called "three Cs" of contractor compliance) including: vendors should be asked to certify, in writing, that they are following their obligations as employers regarding immigration compliance and that they verify that their workers are authorized to be employed in the U.S. Sample certification language is attached.

1. **COMMUNICATE:** We will communicate ICE Best Employment Practices to every contractor or subcontractor we use by attaching a copy to our bid and contracts.
2. **CONTRACTS:** All new contracts with contractors contain contractor immigration compliance certification language.
3. **CERTIFICATION:** NO CONTRACTOR AND/OR SUBCONTRACTOR IS ALLOWED TO WORK ON SITE UNLESS THEY INDICATE ON THE ATTACHED IMMIGRATION COMPLIANCE CERTIFICATION REQUEST THAT THE CONTRACTOR COMPLIES WITH ALL LISTED IMMIGRATION LAW REQUIREMENTS.

## **SAMPLE EMAIL TO CONTRACTORS:**

*"To Whom It May Concern:*

*With regard to \_\_\_**Employer's**\_\_\_ Corporate Immigration Compliance Plans, Policies, and Procedures:*

- 1. I am providing you with a copy of ICE Best Practices*
- 2. Please review and fill out our Contractor Certification Language*
- 3. Please sign and email it to me as soon as possible."*

## Employer Immigration Certification

### for Contractors/Subcontractors

We comply with immigration law requirements as follows:

- We have received a copy of ICE Best Practices, and are working on implementing appropriate immigration compliance practices. We comply with all federal and state laws pertaining to immigration compliance, we do not knowingly employ unauthorized workers, and we do not knowingly work with subcontractors not authorized to work in the United States.
- We maintain properly executed I-9s on all employees hired after November 6, 1986
- We use E-Verify

We registered for E-Verify on \_\_\_\_\_

Our E-Verify registration No. is \_\_\_\_\_

- We keep copies of document(s) recorded in Section 2 of the I-9 with our I-9s

BY: \_\_\_\_\_  
NAME OF COMPANY

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

# ICE BEST EMPLOYMENT

## PRACTICES

### 12 Best Hiring Practices

**NOTE:**

**These are the Best Employment Practices recommended by US Immigrations and Customs Enforcement (ICE).**

1. Use E-Verify, the OHS employment eligibility verification program, to verify the employment eligibility of all new hires.
2. Use the Social Security Number Verification Service (SSNVS) and make a good faith effort to correct and verify the names and Social Security numbers of the current workforce.
3. Establish a written hiring and employment eligibility verification policy.
4. Establish an internal compliance and training program related to the hiring and employment verification process, including completion of Form I-9, how to detect fraudulent use of documents in the verification process, and how to use E-Verify and SSNVS.
5. Require the Form I-9 and E-Verify process to be conducted only by individuals who have received appropriate training and include a secondary review as part of each employee's verification to minimize the potential for a single individual to subvert the process.
6. Arrange for annual Form I-9 audits by an external auditing firm or a trained employee not otherwise involved in the Form I-9 process.
7. Establish a procedure to report to <sup>management</sup> ICE credible information of suspected criminal misconduct in the employment eligibility verification process.
8. Establish a program to assess subcontractors' compliance with employment eligibility verification requirements. Encourage contractors to incorporate IMAGE Best Practices and when practicable incorporate the verification requirements in subcontractor agreements.
9. Establish a protocol for responding to letters received from federal and state government agencies indicating that there is a discrepancy between the agency's information and the information provided by the employer or employee (for example, "no match" letters received from the Social Security Administration).
10. Establish a <sup>open-door policy</sup> tip-line mechanism (inbox, e-mail, etc.) for employees to report activity relating to the employment of unauthorized workers, and a protocol for responding to employee tips.

11. Establish and maintain appropriate policies, practices and safeguards against use of the verification process for unlawful discrimination, and to ensure that U.S. citizens and authorized workers do not face discrimination with respect to hiring, firing, or recruitment or referral for a fee because of citizenship status or national origin.
12. Maintain copies of any documents accepted as proof of identity and/or employment authorization for all new hires.

For more information on the IMAGE Program, please visit the [IMAGE FAQ](#) page. You may request an information packet via the [IMAGE Information Packet Request](#) form.

From [www.ice.gov](http://www.ice.gov)

Last Modified: Friday, February 26, 2010

## Language to Add to Contactor/ Subcontractor Agreement re Immigration Compliance

The Subcontractor represents to **Requestor** that all employees and/or subcontractors of the Subcontractor are duly authorized to work in the United States, and that Subcontractor complies with all applicable requirements of the Immigration Reform and Control Act (IRCA) and other federal and state laws governing identity and employment authorization verification. Should **Requestor** and/or any of its owners or employees incur any liability or legal expenses in connection with Subcontractor's company's failure to comply with any immigration law requirements, Subcontractor will indemnify **Requestor** and any of its owners for any such liability or legal expenses incurred. Exhibit 2 contains documents relating to this agreement that need to be signed before workers are on site. If the Subcontractor is awarded contract, Subcontractor will need to be able to demonstrate, at a minimum, that the Subcontractor is in compliance with the following employer immigration compliance requirements:

1. Maintain properly executed Form I-9 on all employees hired after November 6, 1986, ensuring that you have established identity and employment authorization for all workers you have on our sites
2. Use E-Verify
3. Keep copies of document(s) recorded in Section 2 of the I-9 Form
4. We also encourage the Subcontractor to work towards other ICE Best Practices (attached in Exhibit 2), including, but not limited to:
  1. Maintain a written immigration compliance plan, policies, and procedures based on ICE (Immigration Customs Enforcement) Best Practices
  2. Conduct I-9 administrator training at least once a year
  3. Allow your Form I-9s to be administered only by individuals who have received the I-9 Administrator training
  4. Internal I-9 Audits: Have your I-9s audited by an external I-9 Auditor, have your I-9s corrected, and keep written audit notes and audit report available for inspection
  5. Have a written procedure for Social Security Number No-Match letters
  6. Have written procedures to ensure that the verification process is not used to discriminate against eligible individuals
  7. For subcontractors, if any, communicate these requirements to them, include these requirements into your agreements with subcontractors, and receive certification and audit their compliance with these requirements
  8. Other ICE-encouraged compliance practices



**Individual Contractor Certification**

I, \_\_\_\_\_, am an authorized representative of

\_\_\_\_\_ (name of contractor/subcontractor company), and do hereby certify that I and (if any) all the employees of this company and/or contractors of this company are duly authorized to work in the United States, and that this company has an immigration law compliance policy and a comprehensive immigration compliance plan. Should any of our customers/clients incur any liability or legal expenses in connection with this company's failure to comply with immigration laws of the United States, this company agrees to indemnify any of our customers/clients for any such liability or legal expenses incurred.

By:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# CONTRACTOR IMMIGRATION COMPLIANCE AUDITS

Contractor Certification Audits should be conducted every twelve (12) months and preferably in concurrence with I-9 Audits.

**Base Audit Performed On \_\_\_\_\_, 20\_\_**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**20\_\_ Audit Scheduled for \_\_\_\_\_, 20\_\_**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**20\_\_ Audit Scheduled for \_\_\_\_\_, 20\_\_**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
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\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**20\_\_ Audit Scheduled for \_\_\_\_\_, 20\_\_**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**20\_\_ Audit Scheduled for \_\_\_\_\_, 20\_\_**

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Signature

Title

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Name

Date

**20\_\_ Audit Scheduled for \_\_\_\_\_, 20\_\_**

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Signature

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**20\_\_ Audit Scheduled for \_\_\_\_\_, 20\_\_**

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**20\_\_ Audit Scheduled for \_\_\_\_\_, 20\_\_**

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Signature

Title

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Name

Date

# 10

## **Immigration Compliance Records**

# IMMIGRATION RELATED RECORDS

## ▪ WHAT IS THIS?

This is a sample policy on what immigration compliance-related records must be kept.

## ▪ HOW TO USE THIS

Review the policy. If it is a good fit for your company, adopt it. Conduct training.

## NOTES:

# IMMIGRATION COMPLIANCE RECORDS

Every employer should keep its immigration-compliance records in good order.

## **These include, at a minimum:**

1. Current I-9s
2. Terminated I-9s
3. Contractor Immigration Compliance Certifications
4. Immigration Compliance Plan, Policy and Procedures
5. I-9 Audit Records
6. Visa-Specific Records, if applicable

## **This is how employer immigration-related records should be kept:**

### **1. Current I-9s**

Hard copies I-9s should be kept in alphabetical order in CURRENT I-9s binders, separate from Employee Personnel Files. Copies of supporting documents and E-Verify printouts for those hired after the employer registers for E-Verify should follow each I-9. For workers with expiring work visas and work authorizations, 120-day and the date-of expiration reminders should be entered into the Employment Authorization Re-Verification Table and in I-9 Administrator's Outlook.

Electronic Copies: we also always recommend that electronic copies of I-9s are kept. In addition, as long as the procedures for electronic records keeping meet requirements outlined in M-274, electronic copies may completely replace hard copies of I-9s. One word of caution: there has not yet been any cases testing if an employer meets M-274 requirements on keeping electronic copies only.

### **2. Terminated I-9s**

Once the worker is terminated, the I-9 Administrator should calculate the Date of Timely Destruction, which is three (3) years from date of hire or one (1) year from date of termination, whichever is later. I-9s should be transferred into Terminated I-9 Binder(s) and/or computer file. I-9s should be destroyed and the destruction properly recorded as prompted by the Destruction Table.

### **3. Contractor Immigration Compliance Certifications**

There are two ways to keep track of Contractor Immigration Compliance Certifications. One way is for each certification to be kept as an exhibit to the contract, and that in my opinion is the preferable way if you have many contractors. Another way is to keep copies in a separate binder or computer folder, in alphabetical order.

### **4. Immigration Compliance Plan, Policy and Procedures**

These should be kept at the central office both in hard and electronic copy, with copies available to I-9 Administrators at the local offices or through electronic access. The Compliance Plan, Policy and Procedures should be updated at least once a year and when there are significant changes in the law.

### **5. I-9 Audit Records**

These should be kept in hard copy or electronic copy.

### **6. Visa-Specific Records**

Special rules apply if the employer sponsors work visas or employment-based green cards.

H-1Bs: Public Access Files should be kept for each H-1B employee.

Other Visas: If used, make sure the rule for record-keeping is enclosed after this page.

Labor Certifications: Proof of Recruitment and copy of the application should be kept for each employee for at least 5 years.



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**IRCA Non-Discrimination  
Procedures**

# **Balancing Employer Immigration Compliance with Non-Discrimination and Diversity**

# Sample Procedures for Reporting and Investigating Allegations of Unauthorized Employment and/or Prohibited Discrimination and Training Materials

## ▪ WHAT IS THIS?

These are procedures and training materials to ensure that the employer complies with immigration law requirements but does not use them to engage in unlawful discrimination.

## ▪ HOW TO USE THIS

Read the procedures and adopt them if they are a good fit for your company. Use the training materials to train your I-9 Administrators and other personnel as part of your annual immigration compliance training.

## NOTES:

**U.S. Department of Justice**  
Civil Rights Division  
*Office of Special Counsel for Immigration-Related  
Unfair Employment Practices*



## **Look At The Facts. Not At The Faces.**

Your Guide  
To Fair Employment



## What Do You Need to Know About INA ?

The Immigration and Nationality Act (INA), which the Immigration Reform and Control Act of 1986 (IRCA) amended, requires that you, as an employer, verify the identity and work eligibility of every employee hired after November 6, 1986. It is now illegal to knowingly hire anyone who is not authorized to work in the United States. As part of this process, you must complete the Department of Homeland Security's Form I-9 for all your employees—citizens and noncitizens alike. Failure to comply with the I-9 requirements may result in sanctions against you.

Congress recognizes that these employer sanctions might unintentionally discourage you from hiring workers who are not U.S. citizens or who appear to be foreign. In order to protect work-authorized individuals, INA also contains provisions prohibiting discrimination in hiring and firing on the basis of citizenship status or national origin. Under these provisions, you must treat all qualified, eligible job applicants equally. Employers found to discriminate may be required to pay fines and penalties, and to hire or rehire employees, with back pay.



## How Do You Avoid Immigration-Related Employment Discrimination?

- Treat all people the same when you are announcing the job, taking applications, interviewing, offering the job, filling out the Form I-9, hiring, and firing.
- Avoid "citizens only" hiring policies or requirements that applicants have a particular immigration status, unless required by law.
- Give out the same job information over the telephone and use the same application forms for all applicants.
- Base your decisions about firing on job performance and/or behavior, not on appearance, language, name, or citizenship status of your employees.

## How Do You Comply with the Form I-9 Requirements?

- In order to avoid any appearance of discrimination, verify work eligibility **after** you have decided to hire an individual and allow your employee three days to provide the documents.
- Let your employee **choose** which documents to present, as long as they appear to be reasonably genuine.
- Understand that there are many different documents, with different appearances, that your employee may present. You can find a list of these documents on the back of the Form I-9.



## How Do You Comply with INA's Hiring Regulations ?

- Hire only those persons that are authorized to work in the U.S.
- Ask all your new employees—U.S. citizens and noncitizens alike—to show documents that establish both identity and work authorization.
- Complete the DHS Employment Eligibility Verification Form I-9 for every new employee.

If You Have Any Further Questions  
about Compliance with INA's  
Antidiscrimination Provisions, Call  
the Office of Special Counsel's  
Automated Employer Hotline :

1-800-255-8155

**TDD for hearing-impaired: 1-800-237-2515**  
**In the Washington, D.C. area call: 202-616-5594**

The Employer Hotline will guide you through the employment verification process, and includes a fax-back feature through which you can receive a Form I-9, a list of acceptable documents and tips on fair hiring. There is also an option to speak with an operator.

**or write to OSC at:**  
U.S. Department of Justice  
Civil Rights Division  
**Office of Special Counsel**  
950 Pennsylvania Ave., NW  
Washington, DC 20530

**OSC's e-mail address is:**  
[oscrt@usdoj.gov](mailto:oscrt@usdoj.gov)

**to find us on the web, go to:**  
[www.justice.gov/crt/osc](http://www.justice.gov/crt/osc)





**U.S. Department of Justice**  
Civil Rights Division  
Office of Special Counsel  
for Immigration-Related  
Unfair Employment Practices

950 Pennsylvania Ave., NW  
Washington, DC 20530

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## **Government Audit/Investigation Procedures**

# Sample ICE and Other Government Agencies Audit/Contact Procedures

## ▪ WHAT IS THIS?

This is a sample procedure to follow in case ICE or other government agencies visit the employer with an audit or on account of any other immigration compliance-related questions.

## ▪ HOW TO USE THIS

Review the policy. If it is a good fit for your company, adopt it. Conduct training.

## NOTES:

# IMMIGRATION AND CUSTOMS ENFORCEMENT AND OTHER GOVERNMENT AGENCIES AUDIT/CONTACT PROCEDURES

## RECEPTIONIST'S (OR ANOTHER EMPLOYEE) DUTIES:

### 1. HOW TO GREET GOVERNMENT REPRESENTATIVES

We follow the best available immigration compliance practices. Specifically:

- \_\_\_\_\_ Greet the agents in a courteous and confident manner and inquire about their business.
- \_\_\_\_\_ Ask the agent(s) for a business card.
- \_\_\_\_\_ Inform the agent(s) that you will follow the company procedures and open the written procedures for ICE /Government Audit (this page).
- \_\_\_\_\_ Call the Company's Immigration Compliance officer to take over communication with the government.

## COMPANY'S IMMIGRATION OFFICER'S DUTIES

### 2. CALL THE ATTORNEY

- \_\_\_\_\_ Tell the agent that you are represented by an attorney and that you would like to call your attorney before answering any questions. Then call the company's attorney.

### 3. IF WARRANT

- \_\_\_\_\_ Please ask if the agent(s) if they have a warrant
- \_\_\_\_\_ If they do, tell them you are ready to cooperate.
- \_\_\_\_\_ Ask the officer(s) for time to MAKE A COPY of requested documents

### 4. IF NO WARRANT

- \_\_\_\_\_ If the agent does not have a warrant, they probably have a Notice of Inspection (subpoena). You have three days, or more in some cases, to produce the record.
- \_\_\_\_\_ Make sure you have his (her) business card and copies of any paperwork he (she) wants the company to have.
- \_\_\_\_\_ Tell the agent the company's attorney will produce the record in three days.
- \_\_\_\_\_ Provide copies to the company's attorney.