

# Behind the Scene Tips for Form I-9 Compliance



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# Form I-9 — What You Need to Know



# Agenda

- Form I-9 Requirements.
- A Little Background.
- Storage and Retention.
- Form I-9 and E-Verify Work Together.
- Resources.



# Working in the U.S.

In 1986, in an effort to control illegal immigration, Congress passed the **Immigration Reform and Control Act (IRCA)**.

Individuals who may legally work in the United States:

- Citizens of the United States.
- Noncitizen Nationals of the United States.
- Lawful Permanent Residents.
- Aliens Authorized to Work.



# Employment Verification

To comply, an employer must:

- Verify the documents of employees hired after November 6, 1986.
- **Complete** and **retain** a **Form I-9**.
- **Refrain from discriminating against** individuals on the basis of actual or perceived national origin, citizenship or immigration status.

\*The employment eligibility verification provisions, and sanctions, of [IRCA](#) are found in [Section 274A of the Immigration and Nationality Act](#) (INA).

# Preventing Discrimination

The anti-discrimination provisions of the INA prohibit four types of unlawful conduct:

- Citizenship or immigration status discrimination.\*
- National origin discrimination.\*
- Document abuse during Form I-9 process.
- Retaliation.

\* *Actual or perceived*

IF YOU HAVE THE RIGHT TO WORK,  
Don't let anyone take it away.



# Immigrant and Employee Rights Section (IER)

The anti-discrimination provisions of the INA are enforced by:

**Department of Justice**

**Civil Rights Division**

**[Immigrant and Employee Rights Section](#)**

- Employees may contact the IER to obtain additional information regarding employment discrimination and employee rights and responsibilities.\*

**1-800-255-7688 (TDD: 1-800-616-5525)**

- Employers may also contact IER.\*

**1-800-255-8155 (TDD: 1-800-362-2735)**

See [“Employer Do’s and Don’ts.”](#)

\*callers may remain anonymous



— U.S. DEPARTMENT OF JUSTICE —  
**IMMIGRANT & EMPLOYEE RIGHTS SECTION**  
— CIVIL RIGHTS DIVISION —

# Authorized Representative

You may have an [authorized representative](#)\* fill out Forms I-9 on your behalf. Some examples include:

- Personnel officer.
- Foreman.
- Agent.
- Supervisor.
- Notary Public.



\*He/she must carry out full Form I-9 responsibilities; the employer is still liable for any violations.

\*If an employer hires a Notary Public, the Notary Public is acting as an authorized representative of the employer, not as a Notary.

# Form I-9 Exceptions

You are **NOT** required to complete **Form I-9** for:

- Casual domestic service employees working in a private household when work is sporadic, irregular or intermittent.
- Independent contractors for whom you do not set work hours, or provide tools to do the job.
- Employees working outside the United States.\*

*\*50 States, District of Columbia, Guam, Puerto Rico, U.S. Virgin Islands, and the Commonwealth of the Northern Mariana Islands.*

# Completing Form I-9

## Lists of Acceptable Documents

## Form I-9

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
1. U.S. Passport or U.S. Passport Card		1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address		1. A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address		2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		3. School ID card with a photograph		3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
4. Employment Authorization Document that contains a photograph (Form I-765)		4. Voter's registration card		4. Native American tribal document
5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		5. U.S. Military card or draft record		5. U.S. Citizen ID Card (Form I-197)
6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		6. Military dependent's ID card		6. Identification Card for Use of Resident Citizen in the United States (Form I-179)
		7. U.S. Coast Guard Merchant Mariner Card		7. Employment authorization document issued by the Department of Homeland Security
		8. Native American tribal document		
		9. Driver's license issued by a Canadian government authority		
		For persons under age 18 who are unable to present a document listed above:		
		10. School record or report card		
		11. Clinic, doctor, or hospital record		
		12. Day-care or nursery school record		

Examples of many of these documents appear in Part 13 of the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

**Instructions**   **Start Over**   **Print**

**USCIS**  
**Form I-9**  
OMB No. 1615-0047  
Expires 08/31/2019

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

**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** (Employee must complete and sign Section 1 of Form I-9 no later than the first day of employment. Do not believe preclearing at job offer.)

List Name (Family Name)   First Name (Given Name)   Middle Initial   Other Last Names Used (if any)

Address (Street Number and Name)   Apt. Number   City or Town   State   ZIP Code

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

1. A citizen of the United States

2. A noncitizen national of the United States (See instructions)

3. A lawful permanent resident (Alien Registration Number/USCIS Number)

4. An alien authorized to work (Until expiration date, if applicable, mm/dd/yyyy)

Some aliens may write "NA" in the expiration date field. (See instructions)

Alien 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

1. Alien Registration Number/USCIS Number  
OR  
2. Form I-94 Admission Number  
OR  
3. Foreign Passport Number

Country of Issuance   Today's Date (mm/dd/yyyy)

Signature of Employer   Today's Date (mm/dd/yyyy)

**Preparer or Translator Certification (check one):**

I did not use a preparer or translator.    A preparer or translator provided assistance in completing Section 1.

(Fields below must be completed and signed even if preparer and/or translator assisted 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 (mm/dd/yyyy)

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

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

Click to Finish

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**USCIS**  
**Form I-9**  
OMB No. 1615-0047  
Expires 08/31/2019

**Section 1. Employee Information and Attestation**

List Name (Family Name)   First Name (Given Name)   Middle Initial   Other Last Names Used (if any)

Address (Street Number and Name)   Apt. Number   City or Town   State   ZIP Code

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

1. A citizen of the United States

2. A noncitizen national of the United States (See instructions)

3. A lawful permanent resident (Alien Registration Number/USCIS Number)

4. An alien authorized to work (Until expiration date, if applicable, mm/dd/yyyy)

Some aliens may write "NA" in the expiration date field. (See instructions)

Alien 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

1. Alien Registration Number/USCIS Number  
OR  
2. Form I-94 Admission Number  
OR  
3. Foreign Passport Number

Country of Issuance   Today's Date (mm/dd/yyyy)

Signature of Employer   Today's Date (mm/dd/yyyy)

**Preparer or Translator Certification (check one):**

I did not use a preparer or translator.    A preparer or translator provided assistance in completing Section 1.

(Fields below must be completed and signed even if preparer and/or translator assisted 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 (mm/dd/yyyy)

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

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

Click to Finish

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# Section 1: Employee Information and Attestation

Section 1. Employee Information and Attestation <i>(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.)</i>				
Last Name (Family Name) ⓘ	First Name (Given Name) ⓘ	Middle Initial ⓘ	Other Last Names Used (if any) ⓘ	
Address (Street Number and Name) ⓘ	Apt. Number ⓘ	City or Town ⓘ	State ⓘ	ZIP Code ⓘ
Date of Birth (mm/dd/yyyy) ⓘ	U.S. Social Security Number ⓘ	Employee's E-mail Address ⓘ	Employee's Telephone Number ⓘ	

- Employee's email address is an optional field.\*
- Employees should enter N/A for skipped fields.
- **Employers** should not enter their business email address in Section 1.

\*E-Verify requires SSN

# Section 1: Employee Attestation

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 <sup>(?)</sup>
<input type="checkbox"/>	2. A noncitizen national of the United States (See instructions) <sup>(?)</sup>
<input checked="" type="checkbox"/>	3. A lawful permanent resident <sup>(?)</sup> (Alien Registration Number/USCIS Number): <sup>(?)</sup> A <span style="float: right;">Alien Number <sup>(?)</sup> <input type="text" value="A"/></span>
<input type="checkbox"/>	4. An alien authorized to work <sup>(?)</sup> until (expiration date, if applicable, mm/dd/yyyy): <sup>(?)</sup> N/A <span style="float: right;">Alien Number <sup>(?)</sup> <input type="text" value=""/> USCIS Number <sup>(?)</sup> <input type="text" value=""/></span>

Some aliens may write "N/A" in the expiration date field. (See instructions)

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.

1. Alien Registration Number/USCIS Number: <sup>(?)</sup> N/A
<b>OR</b>
2. Form I-94 Admission Number: <sup>(?)</sup> N/A
<b>OR</b>
3. Foreign Passport Number: <sup>(?)</sup> N/A

Country of Issuance: <sup>(?)</sup> N/A

QR Code - Section 1  
Do Not Write In This Space

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

- The employee **MUST** select one of the four categories, sign and date.
- Employees must complete [Section 1](#) no later than the first business day of work for pay.

# Section 1: Preparer/Translator (PT) Certification

<b>Preparer and/or Translator Certification (check one):</b> <a href="#">?</a>			
<input type="checkbox"/> I did not use a preparer or translator.		<input checked="" type="checkbox"/> A preparer(s) and/or translator(s) assisted the employee in completing Section 1. How many? <a href="#">?</a>	
<i>(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)</i>			
<b>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.</b>			
Signature of Preparer or Translator <a href="#">?</a>		Today's Date (mm/dd/yyyy) <a href="#">?</a>	
Last Name (Family Name) <a href="#">?</a>		First Name (Given Name) <a href="#">?</a>	
Address (Street Number and Name) <a href="#">?</a>		City or Town <a href="#">?</a>	State <a href="#">?</a> ZIP Code <a href="#">?</a>

- Required when Section 1 is prepared by someone other than the employee.
- Employees must check the **first** box if they **don't** use a preparer or translator.
- Supplemental sheet available for paper copies.

# Section 2: Employer Certification of Document Review

## Completing Section 2

- Completed by EMPLOYER.
- MUST be completed by the employer or authorized representative.
- EMPLOYER must certify that the document is authentic and valid.
- Document must be reviewed by the employer or authorized representative.

### 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 that cannot be entered in the drop-downs provided
- 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.

Instructions Start Over Print

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

USCIS  
**Form I-9**  
OMB No. 1615-0047  
Expires 08/31/2019

**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 that cannot be entered in the drop-downs provided
- 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.

**Signature of Employer or Authorized Representative**  
Martha Jefferson

**Today's Date(mm/td/yyyy)**  
4/26/2017

**Title of Employer or Authorized Representative**  
HR Manager

**Last Name of Employer or Authorized Representative**  
Jefferson

**First Name of Employer or Authorized Representative**  
Martha

**Employer's Business or Organization Name**  
Eagle Eagle Inc.

**Employer's Business or Organization Address (Street Number and Name)**  
123 Bill of Rights Way


**City or Town**  
Charles City

**State**  
VA


**ZIP Code**  
20002











Click to Finish

## Section 2: Hire Date Field

Expiration Date (if any)(mm/dd/yyyy)   
N/A

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 2 completion in progress.*

- First day of employment for pay.
- Date does not need to match the signature date.
- Form I-9 can be completed prior to first day of work for pay once job has been offered to and accepted by employee.

# Section 2: Examining Documents

You must accept a document presented by an employee if it reasonably appears to be:

- Genuine, *and*
- Relates to the individual presenting it.



The document must be original — photocopies are NOT acceptable, except for a [certified](#) copy of a birth certificate.



# Who Issued this Document?

## Document Matrix

	Document Type	A Citizen of the U.S.	A Noncitizen National of the U.S.	A Lawful Permanent Resident	An Alien Authorized to Work
LIST A	U.S. Passport or Passport Card	●	●		
	Permanent Resident Card or Alien Registration Receipt Card (Form I-551)			●	
	Foreign passport with temporary I-551 stamp or printed notation on a MRIV			●	
	Employment Authorization Document (Form I-766)				●
	Foreign passport with with Arrival/Departure Record (Form I-94)				●
	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A				●
LIST B	Driver's License or ID card issued by a U.S. state or outlying possession	●	●	●	●
	ID card issued by a U.S. federal, state, or local government agency	●	●	●	●
	School ID card	●	●	●	●
	Voter registration card	●	●	●	●
	U.S.military card or draft record	●	●	●	●
	Military dependent's ID card	●	●	●	●
	U.S.Coast Guard Merchant Mariner Card	●	●	●	●
	Native American tribal document	●	●	●	●
	Driver's license issued by a Canadian government authority	●	●	●	●
	School record or report card (under age 18)	●	●	●	●
	Clinic, doctor, or hospital record (under age 18)	●	●	●	●
	Daycare of nursery school record (under age 18)	●	●	●	●

# What should I do if...?

## Examining Documents

If your employee	Then you should	Tips
Provides documentation that reasonably appears to be genuine, relates to the employee, and is on the Lists of Acceptable Documents	Accept the documentation.	
Provides a document that does not reasonably appear to be genuine or relate to the employee or is not on the Lists of Acceptable Documents	Reject the document and ask your employee to provide other document(s) that satisfy Form I-9 requirements.	The standard is reasonableness. You are not expected to be a document expert.
Writes more than one last name in Section 1, but presents a document from the List of Acceptable Documents that has only one of those last names	Ask your employee the reason for the difference in the names. If the document reasonably appears to be genuine and to relate to the individual, you may accept the document.	Attach a memo to Form I-9 explaining the discrepancy.
Presents a document from the List of Acceptable Documents in which his or her name is spelled slightly differently than the name he or she wrote in Section 1	Ask your employee the reason for the difference in spelling. If it reasonably appears to be genuine and to relate to the individual, you may accept the document.	Ask your employee to use his or her full legal name in Section 1. Ask him or her to do one of the following: correct Form I-9 and initial the change; provide a different document with the correct spelling; provide you a corrected document.
Provides a document in which the name the employee wrote in Section 1 is completely or substantially different from the name on the document	Ask the employee the reason for the name change  If your employee maintains that the name in Section 1 is his or her legal name and you are satisfied that the document reasonably appears to relate to the employee, you may accept the document.	Attach a memo to the Form I-9 explaining the discrepancy.  If the employee voluntarily provides proof of a name change, you may keep a copy of it with the memo.
Provides a document that does not reasonably appear to be genuine and/or to relate to the individual or if he or she cannot present other documents to satisfy the requirements of Form I-9	You may terminate employment.	

# Receipts

1. A receipt showing that your employee has applied to replace a document that was **lost, stolen** or **damaged**.
  - Employee must present a replacement document within 90 days of the hire date.
  - You cannot accept receipt if employment is less than 3 days.



# Documenting the Replacement of Receipts



- Enter the word “Receipt” followed by the title of the document in Section 2 under the list that relates to the receipt.
- When your employee presents the original replacement document, cross out the word “Receipt,” then enter the information from the new document into Section 2.

# Other Receipts

Receipt	Who may present this receipt?	Is this receipt proof of employment authorization and/or identity?	How long is this receipt valid?	What must the employee present at the end of the receipt validity period?
The arrival portion of the Form I-94 or I-94A containing a Temporary I-551 stamp and photograph.	Lawful permanent residents.	Employment authorization and identity (List A).	Until the expiration date of the Temporary I-551 stamp, or if no expiration date, one year from date of admission.	The actual Form I-551 (Permanent Resident Card or “Green Card”).
The departure portion of Form I-94 or I-94A with an unexpired refugee admission stamp.	Refugees.	Employment authorization and identity (List A).	90 days from date of hire or, for reverification, 90 days from the date employment authorization expires.	An unexpired EAD (Form I-766) or a combination of a valid List B document and an unrestricted Social Security card.



## Section 2: Copying Documents

You may choose to make copies of documents employees present for Section 2.

- If you choose to photocopy documents:
  - ✓ You must do so for **ALL** employees.
  - ✓ Be consistent and copy **all** documents employees provide.



# Section 3: Reverification and Rehires

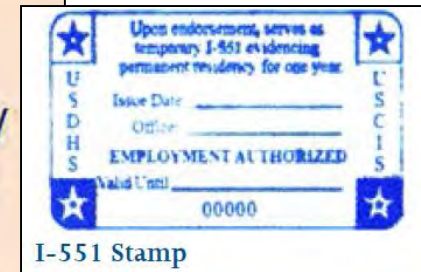
Section 3. Reverification and Rehires <i>(To be completed and signed by employer or authorized representative.)</i>			
A. New Name <i>(if applicable)</i> ?			B. Date of Rehire <i>(if applicable)</i>
Last Name <i>(Family Name)</i> ?	First Name <i>(Given Name)</i> ?	Middle Initial ?	Date <i>(mm/dd/yyyy)</i> ?
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 <i>(if any)</i> <i>(mm/dd/yyyy)</i> ?	
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 <i>(mm/dd/yyyy)</i> ?	Name of Employer or Authorized Representative ?	

- You **MUST** reverify an employee using [Section 3](#) if his or her temporary employment authorization has expired. Name changes must be updated during reverification.
- You **MAY** also complete Section 3 if you:
  - **Rehire** the EMPLOYEE within 3 years of initial execution date of the Form I-9.
  - Update the **biographic information** of an employee.

# Section 3: When to Reverify

## Reverify

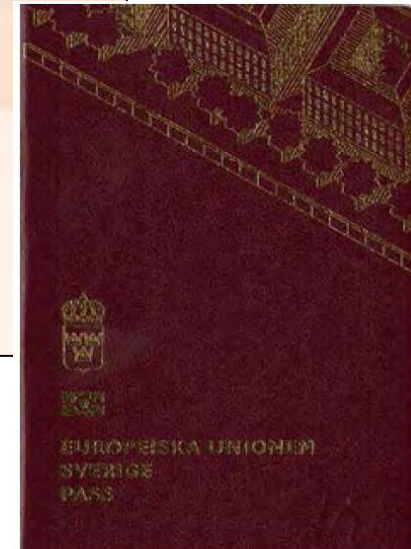
- When employment authorization document (List A or C) has an expiration date
- Form I-94 with a temporary I-551 stamp
- An unexpired foreign passport with a temporary I-551 stamp (on a machine readable immigrant visa (MRIV))
- Expired Permanent Resident Card presented with a Form I-797 (Notice of Action)



I-551 Stamp

## Do Not Reverify

- U.S. Passport or Passport Card
- Permanent Resident Card (From I-551)
- List B documents



Unexpired Foreign Passport with I-551 Stamp

# Staying Compliant with Form I-9

- Always check completed Form I-9 for incorrect or missing:
  - Name.
  - Address.
  - Attestation.
  - Document numbers.
  - Date of hire.
  - Signatures.
  - Required List A, or combination List B & C documents.



# Correcting Form I-9

For **mistakes** you can:

- **Correct** the existing Form I-9: Line out the incorrect portions, enter the correct information, and initial and date the correction.
  - Section 1, the **employee** must make the corrections, initial and date.
  - Section 2, the **employer** must make the corrections, initial and date.

Section 1. Employee Information and Address <i>Complete this section for the current Form I-9. Do not complete this section for a previous Form I-9, even if the employee has not changed their information since the first day of employment, but not before.</i>	
Last Name (Family Name) ⓘ Washington	First Name Georg
Address (Street Number and Name) ⓘ 123 Main St	
Date of Birth (mm/dd/yyyy) ⓘ <del>01/01/1976</del> 01/01/1975 <i>gw</i> 5/15/2017	U.S. Social Security Number

OR

- **Complete** a new Form I-9 and retain it with the old form. Attach a short memo to the new and old Forms I-9 stating the reason for your action.

# Missing Forms I-9

For an employee's **missing** Form I-9:

- Immediately provide the employee with a current Form I-9.
- DO NOT backdate completion date on the Form I-9; use original hire date.
- Best practice: Memo.



# Storage and Retention



# Storage and Retention

Form I-9 must be on file for all current employees and stored **securely** in a way that meets your business needs — on-site, off-site, storage facility or electronically.

- [Store Forms I-9](#) and document copies together or with personnel file.
- Ensure that only authorized personnel have access to stored Forms I-9.

[Retain](#) Forms I-9 for:

- **3 years after** the date you **hire** an employee, **or**
- **1 year after** the date employment **terminates**, whichever is later.

# Employment Verification

## Form I-9 Reminders

### Employees:

- Complete Section 1 of Form I-9 by **first** day of work for pay.
- Present acceptable documents by **third** day of work for pay.

### All U.S. Employers:

- Retain Form I-9 for all employees hired after November 6, 1986, current and within retention period.
- Revision date **July 17, 2017** for new hires and reverifications.
- Complete Section 2 by 3rd business day after work for pay.
- Verify identity and employment authorization documents.
- Not use Form I-9 to prescreen.

# Additional Resources

## Engage with us online and via social media

- Visit our public website [www.E-Verify.gov](http://www.E-Verify.gov)
- Check out our videos, E-Verify User Manual, job aids, fact sheets, and reports on the [Employer Resources](#) page
- Additional websites: [I-9Central](#), [myE-Verify](#)
- Subscribe to our [E-Verify Connection](#) newsletter
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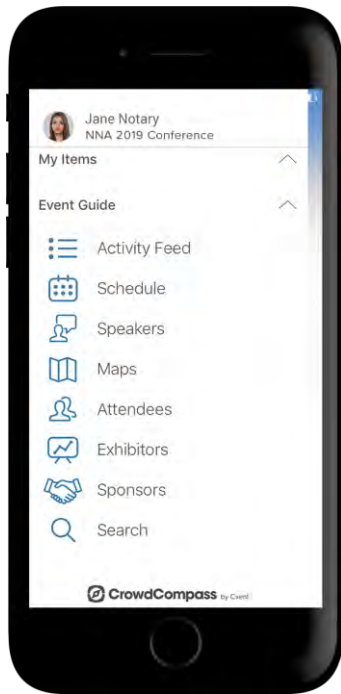
# Contact Us

## E-Verify Outreach

Thank you for attending our session!

Contact me at [NVOCout@uscis.dhs.gov](mailto:NVOCout@uscis.dhs.gov)





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