UPDATED EMPLOYMENT

ELIGIBILITY VERIFICATION - I-9

August 2013

New I-9 Form 2013

| S) | Employment Eligibility Verification Department of Homeland Security U.S. Citizenship and Immigration Services | | | USCIS Form I-9 OMB No. 1615-0047 Expises 03-31/2016 | |
|--|---|---|---------------------------|--|--|
| ANTI-DESCRIMINATION NOT | ICE: It is liegal to disort rom an employee. The n | completing this form. The instructions must be iminate against work-authorized individuals. E vfusal to hire an individual because the docum on. | mployers C | ANNOT specify which | |
| Section 1. Employee In than the first day of employ. | | Itestation (Employees must complete and coepting a job offer.) | aign Sectio | on 1 af Form I-9 no leter | |
| Last Name (Family Name) | First Nar | ne (Given Name) Middle Initial Oth | er Names U | sed (if any) | |
| Address (Street Number and Na | me) | Apt. Number City or Town Given Name (First Name) | State | Zip Code | |
| Date of Birth (mm/dd/yyyy) U.S | S Social Security Number | | | Telephone Number | |
| sonnection with the comple attest, under penalty of per A closen of the United Siz A nonotizen national of th A lawful permanent reside An alen authorized to write (See instructions) For alens authorized to w 1. Alien Registration Num OF 2. Form I-94 Admission N | ition of this form. rjury, that I am (sheek ten te United States (See ii ent (Allen Registration I antil (expiration date, if ap vork, provide your Allen benUSCIS Number R umber mission number from C weing: | nstructions) Number/USCIS Number): | me alera m orm i-94 Ag | ay write "N/A" in this field. | |
| Country of Issuance | | | - | | |
| Some aliens may write | "N/A" on the Foreign P | assport Number and Country of Issuance fie | kds. (See k | rathuctions) | |
| | | 0 | istie (mmistala) | mm | |
| Signature of Employee: | | | | | |
| Signature of Employee Preparer and/or Translat | or Certification (7a) | be completed and signed if Section 1 is prep | ared by a p | eroon other than the | |
| Signature of Employees Preparer and/or Translat employee.) attest, under penalty of per | rjury, that I have assis | | | | |
| Signature of Employee Preparer and/or Translat employee.) attest, under penalty of pen nformation is true and com | rjury, that I have assisted. | be completed and signed if Section 1 is prep | at to the be | | |
| Signature of Employee. Preparer and/or Translat employee.) attest, under penalty of per nformation is true and corr Signature of Preparer or Translat | rjury, that I have assisted. | be completed and signed if Section 1 is prep | at to the b | est of my knowledge the | |
| Signature of Employee. Preparer and/or Translat employee.) | rjury, that I have assisted. tot | Le completed and signed # Section 1 is prep sted in the completion of this form and th | at to the b | est of my knowledge the Data (mmiddiyyyy) | |

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 examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document file, issuing authority, document number, and expiration date, if any.)

| Employee Last Name, First Name and Middle Initial from Section 1: | | | | |
|---|-----------------------------------|--|--|--|
| 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/bb/yyyy): | Expiration Date (If any)/mm/dd/yy | yy): Expiration Date (# any) (mm/bb/)yyy): | | |
| Document Title: | | | | |
| Issuing Authority: | 1 | | | |
| Document Number: | 1 | | | |
| Expiration Date (If any)/mm/bb/yyyy): | 1 | 3-D Barcode | | |
| Document Title: | | Do Not Write in This Space | | |
| Issuing Authority. | | | | |
| Document Number: | | | | |
| Expiration Date (If any)/mm/bb/yyyy): | 1 | | | |

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 Represer | tative | Date (mm/dd/yy | yadi | Title of Employer or Authorized Representative |
| Last Name (Family Name) | First Name (Giv | | | ployer's Business or Organization Name |
| Employer's Business or Organization Address Section 3. Reverification and R | | Sect | tion 2 | 2., Employer or Authorized Repre Given Name) |
| A. New Name (if applicable) Last Name (Fami | ily Name) First Nam authorization has exp | e (Given Name) | M | Model Initial B. Date of Refire (if applicable) (initiadiyyyy); on for the document from List A or List C the employee |
| Document Title: | | ument Number. | | Expiration Date (if any)(mm/bb/yyyy): |
| | | | | e is authorized to work in the United States, and if to be genuine and to relate to the individual. |
| Signature of Employer or Authorized Represe | ntative: Date | (mm/dd/yyyy): | Prir | rint Name of Employer or Authorized Representative: |
| Form I-9 03/08/13 N | | | | Page 8 of 9 |

Summary of Section 1 Changes to I-9 Form

• Implementation required by 5/7/13

- Section 1 must be completed by the employee <u>on the first</u> <u>date of hire or earlier</u>. Section 2 is still within 3 business days of hire date
- Maiden Name is now called "Other Names Used." Provide all other names used, if any and including your maiden name.
 <u>Write N/A</u> if you have no other legal names.
- The Social Security Number boxes are now formatted to fit 9 digits.

Summary of Section 1 Changes to I-9 Form

- Email address and telephone numbers are optional.
- The alien authorized to work checkbox section has been expanded. Employees can enter their Alien Registration Number (which only certain visa types have) OR their I-94 number.
- If the visa holder was provided his/her I-94 form upon arrival by U.S. Customs and Border Protection, he/she must list his/her passport data used to enter the country. If issued the I-94 while within the United States, he/she should write N/A in the passport fields (e.g., someone granted an extension).

Section 1 Changes



Employment Eligibility Verification

Department of Homeland Security U.S. Citizenship and Immigration Services USCIS Form I-9 OMB No. 1615-0047 Expires 03/31/2016

START HERE. Read instructions carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire 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 (Family Name) | First Name (Given Nam | e) Middle Initial | Other Names Used (if any) | 1 |
|---|--------------------------|-------------------|---------------------------|---|
| Address (Street Number and Name) | Apt. Number | City or Town | State Zip Code | |
| Date of Birth (mm/dd/yyy) 2 Social Security | rity Number E-mail Addre | ISS | 3 Telephone Number | 4 |

Maiden Name is now called "Other Names Used (if any)". Per instructions, provide all other names used, if any (including maiden name). Write N/A if you've not had other legal names.

Social Security Number boxes are now formatted to fit 9 digits

Email Address is an optional field.

• Telephone number is an optional field.



1

The alien authorized to work checkbox section has been expanded- employees can enter their Alien Registration Number (which only certain visa types have) OR their I-94 number. If the visa holder was provided his/her I-94 form upon arrival by U.S. Customs and Border Protection, he/she must list his/her passport data used to enter the country. If issued the I-94 while within the United States, he/she should write N/A in the passport fields (e.g. someone granted an extension).

Summary of Section 2 Changes to I-9 Form

- Includes words to make it clearer that an "Authorized Representative," such as designated agent or notary, can act in an agent capacity in completing Section 2.
- Representative must enter the employee's last and first name, and initial in text box. (This ensures the employee's name appears on the 2nd page should it get separated from page 1.)
- Additional test boxes are provided to write list A documentation.

Section 2 Changes

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 Lot A OR examine a combination of one document from List B and see document from List C as lated on the "Lists of Acceptable Occuments" on the next page of this form. For each document you review, record the following information: document title, isoung authority, document mether, and equivalent date, if any)

Employee Last Name, First Name and Middle Initial from Sect

| OR List a | AND List C Employment Authorization | |
|---------------------------------------|--|--|
| Document Title | Document Title: | |
| Issuing Authority: | Teauing Authority: | |
| Document Number | Document Number | |
| Expiration Date (# any)(mmitid/yyyy): | Expiration Date (# any)(mm/dd/yyyy): | |
| | | |
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| | 3-0 Baroode | |
| 1 | Do Not Write in This Space | |
| - | | |
| - | | |
| - | - | |
| | Identity Document Yele Issuing Authority: Discument Number | |

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.

tructions for exemptions.)

The employee's first day of employment (mm/dd/yyyy)



Includes words to make it clearer that an "Authorized Representative," such as designated agent or notary, can act in an agent capacity in completing Section 2. Representative must enter the employee's last name and first name, and initial each text box. (This ensures the employee's name appears on the 2nd page should it get separated from page 1.) Additional text boxes are provided to write list A documentation.

Enter the employee's first day of employment.

I-9 EMPLOYMENT ELIGIBILITY

DO'S AND DON'TS



I-9 – DO'S

- Ask job applicants if they are authorized to work full time.
- Make photocopies of documents and attach the copies to the I-9 form for every employee or for new employees.
- Update the I-9 form if the original I-9 form reveals that the employment authorization of the employee was temporary.
- Notify every job applicant that he or she will be required to produce I-9 documents at the time of hire.
- Apply all procedures equally.

I-9 - DO NOT

- Specify which approved I-9 documents an employee must produce.
- Ask for documents to verify information in section 1
- Ask an employee for more than the required minimum number of approved documents.
- Ask that a foreign national produce immigration documents if the foreign national produces the required minimum documents, such as Social Security card and driver's license.
- Do not include a question on an employment application that asks if a job applicant is a U.S. citizen or permanent resident alien.
- Ask a job applicant if he or she is authorized to work permanently (certain of the classes protected against national origin and citizenship discrimination do not have permanent work authorization, such as refugees, asylees and conditional residents).
- Review a prospective employee's documents or complete the I-9 Form before a hiring decision is made (the documents may reveal information that may lead to a discrimination charge if the person is not hired).

I-9 Reminders

- Make sure employee signed the form-Section 1.
- Make sure the form is complete and accurate including List A <u>OR</u> List B & C, <u>NOT BOTH</u>!
- If the employee does not have the appropriate work authorization documents, <u>she/he may not work</u>.