COMPLETING FORM I-9
AGENDA

- 1-9 Process
- Acceptable Documents for I-9
- I-9 Examples
- Using Document Receipts
- Notary Assistance
- Reverifications
- Avoiding and Correcting Errors
- Penalties
- Practice
Employers may not specify which document or combination of documents that the employee should provide.

Any time after the acceptance of a job offer and the first day of work for pay, the employee may complete Section 1 of Form I-9.

Employers must give the complete 9 page I-9 packet to the employee.

The employee and employer must follow the One Day and Three Day Rule when completing the I-9 form.
One Day and Three Day Rule

**One Day**

- Employees may complete Section 1 of Form I-9 at any time between acceptance of a job offer and the first day of work for pay.
- You may not start the I-9 process before the employee accepts your employment offer.
- The employee must complete Section 1 of Form I-9 by his or her first day of work for pay.

**Three Day**

- The employer must review the employee’s document(s) and fully complete Section 2 of Form I-9 within three business days of the first day of work for pay.
To establish both identity and employment authorization, an employee must present to his or her employer a document or combination of documents, if applicable, from List A, which shows both identity and employment authorization; or one document from List B, which shows only identity, and one document from List C, which show only employment authorization.

Q: May I accept a photocopy of faxed copy of a document presented by the employee?

• A: No. Employees must present original documents. The only exception is that an employee may present a certified copy of a birth certificate.
Acceptable Documents

List A

LIST A: Documents That Establish Both Identity and Employment Authorization

All documents must be unexpired.

1. U.S. Passport or Passport Card
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa (MRIV)
4. Employment Authorization Document (Card) that contains a photograph (Form I-766)
5. In the case of a nonimmigrant alien authorized to work for a specific employer incident to status, a foreign passport with Form I-94 or Form I-94A bearing the same name as the passport and containing an endorsement of the alien’s nonimmigrant status, as long as the period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form
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
### List B: Documents That Establish Identity

*All documents must be unexpired.*

<table>
<thead>
<tr>
<th>For individuals 18 years of age or older:</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>3. School ID card with a photograph</td>
</tr>
<tr>
<td>4. Voter's registration card</td>
</tr>
<tr>
<td>5. U.S. military card or draft record</td>
</tr>
<tr>
<td>6. Military dependent's ID card</td>
</tr>
<tr>
<td>7. U.S. Coast Guard Merchant Mariner Card</td>
</tr>
<tr>
<td>8. Native American tribal document</td>
</tr>
<tr>
<td>9. Driver's license issued by a Canadian government authority</td>
</tr>
</tbody>
</table>

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 |

### List C: Documents That Establish Employment Authorization

*All documents must be unexpired.*

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

   **NOTE:** A copy (such as a metal or plastic reproduction) is not acceptable.

2. Certification of Birth Abroad issued by the U.S. Department of State (Form FS-545)
3. Certification of Report of Birth issued by the U.S. Department of State (Form DS-1350)
4. Original or certified copy of a birth certificate issued by a state, county, municipal authority, or outlying possession of the United States bearing an official seal
5. Native American tribal document
6. U.S. Citizen Identification Card (Form I-197)
7. Identification Card for Use of Resident Citizen in the United States (Form I-179)
8. Employment authorization document issued by DHS
**Form I-9 Section 1**

**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.)

<table>
<thead>
<tr>
<th>Last Name (Family Name)</th>
<th>First Name (Given Name)</th>
<th>Middle Initial</th>
<th>Other Names Used (If Any)</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (Street Number and Name)</th>
<th>Apt Number</th>
<th>City or Town</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1234 56th Street</td>
<td>NA</td>
<td></td>
<td>TX</td>
<td>79409</td>
</tr>
</tbody>
</table>

Date of Birth (mm/dd/yyyy): 01/01/2000

U.S. Social Security Number: ____________

E-mail Address: ____________

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):

- [X] A citizen of the United States
- [ ] A noncitizen national of the United States (See instructions)
- [ ] A lawful permanent resident (Alien Registration Number/USCIS Number): ____________________________
- [ ] An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy) ____________________________
  (See instructions)

For aliens authorized to work, provide your Alien Registration Number/USCIS Number or Form I-94 Admission Number:

1. Alien Registration Number/USCIS Number: ____________________________

OR

2. Form I-94 Admission Number: ____________________________

If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

- Foreign Passport Number: ____________________________
- Country of Issuance: ____________________________

Some aliens may write "NA" on the Foreign Passport Number and Country of Issuance fields. (See instructions)

Signature of Employee: ____________________________

Date (mm/dd/yyyy): 03/08/2013

**Preparer and/or Translator Certification** (To be completed and signed if Section 1 is prepared by a person other than the employee.)

<table>
<thead>
<tr>
<th>Last Name (Family Name)</th>
<th>First Name (Given Name)</th>
<th>Date (mm/dd/yyyy): 03/08/2013</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature of Preparer or Translator: ____________________________

Address (Street Number and Name): 1500 Broadway

City or Town: Lubbock

State: TX

Zip Code: 79409

Employer Completes Next Page
**Form I-9 Section 2**

**Second vignette**

- **Employee Last Name, First Name and Middle Initial from Section 1: Citizen, Us E**
- **List A OR List B AND List C**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Document Title:</td>
<td></td>
<td></td>
<td></td>
<td>Document Title:</td>
<td></td>
</tr>
<tr>
<td>Issuing Authority:</td>
<td></td>
<td></td>
<td></td>
<td>Issuing Authority:</td>
<td></td>
</tr>
<tr>
<td>Document Number:</td>
<td></td>
<td></td>
<td></td>
<td>Document Number:</td>
<td></td>
</tr>
<tr>
<td>Expiration Date (if any) (mm/dd/yyyy):</td>
<td></td>
<td></td>
<td></td>
<td>Expiration Date (if any) (mm/dd/yyyy):</td>
<td></td>
</tr>
</tbody>
</table>

- **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):** 03/08/2013

- **Signature of Employer or Authorized Representative**
  - Last Name (Family Name): Ely
  - First Name: Angeline
  - Employer’s Business or Organization Name: Texas Tech University
  - Employer’s Business or Organization Address (Street Number and Name): 2500 Broadway
  - City or Town: Lubbock
  - State: TX
  - Zip Code: 79409

- **Section 3. Reverification and Rehires** (To be completed and signed by employer or authorized representative)
- A. New Name (if applicable) Last Name (Family Name): Ely
  - First Name (Given Name): Angeline
  - Middle Initial: A
  - Date of Rehire (if applicable) (mm/dd/yyyy)

- **C.** If employee’s previous grant of employment authorization has expired, provide the information for the document from List A or List B the employee presented that establishes current employment authorization in the space provided below.

- **Signature of Employer or Authorized Representative:**

- **Examination Date (if any) (mm/dd/yyyy):**

- **Print Name of Employer or Authorized Representative:**

**Checklist:**
- **Must be completed no more than 3 business days after the employees date of hire.**
- **Ensure employee’s name is written at the top in space provided.**
- **Must complete List A or List B and List C.**
Write employee R# at the top of page.

Ensure employee’s name is written in space provided.

Complete only Section 3 for reverifications.

Employee’s signature is not required.
Documentation for different Visa Status

Most Common Foreign Student/Scholar Status

- Visa Status can be found on the I-94 card/printout
- Make sure all documents provided are UNEXPIRED

**F-1 Status:**
- Foreign Passport
- I-94
- Form I-20

**J-1 Status:**
- Foreign Passport
- I-94
- Form DS-2019
- Sponsor Letter (for students)**

**H1B Status:**
- Foreign Passport
- I-94
The employee may present you with a Unexpired Foreign Passport, I-94, and Form I-20. These documents establish the employee’s identity and employment authorization for Form I-9 purposes and should be recorded under List A in Section 2 of Form I-9.
Examples of I-94 Documents

Form I-94 or Form I-94A Arrival/Departure Record

U.S. Customs and Border Patrol or U.S. Citizenship and Immigration Services issue arrival-departure to nonimmigrants. This document indicates the bearer’s immigration status, the date that the status was granted, and when the status expires. The immigration status notation within the stamp on the card varies according to the status granted, e.g., L-1, F-1, J-1. The Form I-94 has a handwritten date and status, and the Form I-94A has a computer-generated date and status. Both may be presented with documents that Form I-9 speciﬁes are valid only when Form I-94 or Form I-94A also is presented, such as the foreign passport, Form DS-2019, or Form I20.

Admission (I-94) Number Retrieval

Admission (I-94) Record Number: 67800
Admit Until Date (MM/DD/YYYY): D/S
Details provided on Admission (I-94) form:

- Family Name: [Redacted]
- First (Given) Name: [Redacted]
- Birth Date (Day/Mo/Year): [Redacted]
- Passport Number: [Redacted]
- Passport Country of Issuance: India
- Date of Entry (MM/DD/YYYY): 05/26/2013
- Class of Admission: PI

Effective April 28, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(c).

If an employer, local state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.

Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.
**Example of Form I-20**

<table>
<thead>
<tr>
<th>Form Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document number</td>
</tr>
<tr>
<td>Expiration date</td>
</tr>
<tr>
<td>School name - In most cases, the school name will be TTU. It is possible that it is from another school with an endorsement for TTU employment on Page 3.</td>
</tr>
</tbody>
</table>
Example of F1 on I-9

Section 1. Employee Information and Attestation

(Examinee 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, the employee, hereby attest to the following:

1. I am a citizen of the United States.
2. I am a lawfully admitted permanent resident of the United States.
3. I am an alien authorized to work until (expiration date).

For aliens authorized to work, provide your Alien Registration Number/USCIS Alien Number.

Section 2. Employer or Authorized Representative Review and Certification

I, the employer, hereby attest to the following:

1. I have examined the document(s) presented by the above-named employee and have determined that the employee is eligible to work in the United States.
2. I am the employer's authorized representative and have reviewed and signed this form.

Signature of Employer

Preparer and/or Translator Certification

I, the preparer or translator, attest to the information provided above and ensure that it is complete and accurate.

Signature of Preparer or Translator

Section 3. Reverification and Rehires

If an employee's I-9 is reverified, the reversion information must be recorded on the back of the I-9. The employer must maintain the I-9 form for 3 years from the date of employment or 3 years from termination of the employee's employment, whichever is later.
If the employee presents you with an Employment Authorization Document (EAD) that contains a photograph (Form I-766), it is a List A acceptable document.
EAD Example
If an employee presents an Unexpired Foreign Passport, I-94, and DS-2019 you will need to verify if a Sponsor Letter is also needed. These documents establish the employee’s identity and employment authorization for Form I-9 purposes and should be recorded in Section 2 under List A.
✓ Document number can be found in upper right had corner.

✓ Verify Exchange Visitor Category, if category states Student, additional documentation may be needed.

✓ Expiration Date is located on the middle left of page unless Exchange Visitor Category states student, then defer to Sponsor Letter for expiration.
TEXAS TECH UNIVERSITY
Office of International Affairs

October 14, 2011

TO WHOM IT MAY CONCERN:

Re:

As Responsible Officer for the Texas Tech University Exchange Visitor Program, I am designated to approve on-campus employment for J-1 students sponsored by the program [22 CFR 62.23(g)(2)]. I authorize to accept student employment as a student research assistant at Texas Tech University in the School of Law between October 14, 2011 and December 31, 2011. Employment shall be limited to a maximum of twenty hours per week, while the University is in session during the regular fall and spring semesters.

For the completion of Form I-9 for the documents which prove his employment authorization are his Form I-94, Form DS-2019 and this letter. His passport or other acceptable document will prove his identity.

Please contact me if you have any questions concerning this student’s employment authorization.

Sincerely,

Robert T. Crosler, Ph.D.
Responsible Officer
Texas Tech Exchange Visitor Program

b.e.Vprog\empzn.1
### 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.**

<table>
<thead>
<tr>
<th>Last Name (Family Name)</th>
<th>First Name (Given Name)</th>
<th>Middle Initial</th>
<th>Other Names Used (if any)</th>
<th>National</th>
<th>Foreign</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street Number and Name)</td>
<td>Apt. Number</td>
<td>City or Town</td>
<td>State</td>
<td>Zip Code</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date of Birth (mm/dd/yyyy)</td>
<td>U.S. Social Security Number</td>
<td>E-mail Address</td>
<td>Telephone Number</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I am aware that federal law provides for imprisonment and/or fine 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):

- [ ] A citizen of the United States
- [ ] A noncitizen national of the United States (See instructions)
- [X] A lawful permanent resident (Alien Registration Number USCIS Number): ______________

For aliens authorized to work, please provide your Alien Registration Number USCIS Number, or Form I-94 Admission Number:

1. Alien Registration Number USCIS Number: ______________________________
2. Form I-94 Admission Number: ______________________________

If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

- **Foreign Passport Number:** 1234567
- **Country of Issuance:** Any Country

Some aliens may write "NA" on the Foreign Passport Number and Country of Issuance fields. (See instructions)

### 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): 03/08/2013

### Signature of Employee

**Foreign National** Date (mm/dd/yyyy): 03/08/2013

Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.)

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

Signature of Preparer or Translator: ___________________________ Date (mm/dd/yyyy): ________________

### Section 2. List A

**List A Identity and Employment Authorization**

<table>
<thead>
<tr>
<th>Document Title</th>
<th>Issuing Authority</th>
<th>Document Number</th>
<th>Expiration Date (mm/dd/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passport</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Issuing Authority: Any Country</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Document Number: 1234567</td>
<td>Expiration Date (mm/dd/yyyy): 12/31/2040</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Document Title: I-94</td>
<td>Issuing Authority: USCIS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Document Number: 123456789</td>
<td>Expiration Date (mm/dd/yyyy): 12/31/2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Document Title: 96-2019</td>
<td>Issuing Authority: USCIS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Document Number: 12345678910</td>
<td>Expiration Date (mm/dd/yyyy): 12/31/2020</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section 3. Reverification and Rehires

**To be completed and signed by employer or authorized representative.**

A. New Name (if applicable) Last Name (Family Name) First Name (Given Name) Middle Initial Middle Initial

**Document Title:**

<table>
<thead>
<tr>
<th>Document Title</th>
<th>Document Number</th>
<th>Expiration Date (mm/dd/yyyy)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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: ___________________________ Date (mm/dd/yyyy): ________________

Print Name of Employer or Authorized Representative: ___________________________
- An Unexpired Foreign Passport, Form I-94 or Form I-797 establish the employee’s identity and employment authorization for Form I-9 purposes and should be recorded in Section 2 under List A of Form I-9.
Form I-797 Approval Notice Example

- Form name can be found at top right corner.
- School or employer name can be found at top and bottom of page.
- Valid dates of form can also be found at top and bottom of page.
- Record the I-94 number on the Form I-9 and not the Receipt number.
H-1B Example on Form I-9

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.)

<table>
<thead>
<tr>
<th>National</th>
<th>Foreign</th>
<th>E</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Street Number and Name)</td>
<td>Apt. Number</td>
<td>City or Town</td>
<td>State</td>
</tr>
<tr>
<td>1234 56th Street</td>
<td>NA</td>
<td>Lubbock</td>
<td>TX</td>
</tr>
<tr>
<td>Date of Birth (mm/dd/yyyy)</td>
<td>U.S. Social Security Number</td>
<td>E-mail Address</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>01/01/2000</td>
<td>1234567</td>
<td>Optional</td>
<td>Optional</td>
</tr>
</tbody>
</table>

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 (check one of the following):

☐ A citizen of the United States
☐ A noncitizen national of the United States (See instructions)
☐ A lawful permanent resident (Alien Registration Number/USCIS Number): 
☐ An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): 12/31/2020 Some aliens may write "NA" in this field. (See instructions)

For aliens authorized to work, provide your Alien Registration Number/USCIS Number OR Form I-94 Admission Number:

1. Alien Registration Number/USCIS Number: 
2. Form I-94 Admission Number: 1 2 3 4 5 6 7 8 9 1 0

If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

Foreign Passport Number: 1234567
Country of Issuance: Any Country

Some aliens may write "NA" on the Foreign Passport Number and Country of Issuance fields. (See instructions)

Signature of Employee: Foreign National Date (mm/dd/yyyy): 03/08/2013

Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.)

Signature of Preparer or Translator: Date (mm/dd/yyyy): 

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

A. New Name (if applicable) Last Name (Given Name) First Name (Given Name) | Middle Initial | Date of Rehire (if applicable) (mm/dd/yyyy):
B. Date of Rehire (if applicable) (mm/dd/yyyy):

C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below:

Document Title: Document Number: Expiration Date (if any, mm/dd/yyyy):

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: Date (mm/dd/yyyy): Print Name of Employer or Authorized Representative:
## Example: Driver’s License and SS card

<table>
<thead>
<tr>
<th>List A</th>
<th>OR</th>
<th>List B</th>
<th>AND</th>
<th>List C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identity and Employment Authorization</td>
<td>Document Title: Driver’s License</td>
<td>Document Title: Social Security Card</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Issuing Authority</td>
<td>Issuing Authority</td>
<td>Issuing Authority: SSA or 9XX</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Document Number</td>
<td>Document Number: 123456789</td>
<td>Document Number: 123-45-6789</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expiration Date (if any): 12/31/2020</td>
<td>Expiration Date (if any): 12/31/2020</td>
<td>Expiration Date (if any): 12/31/2020</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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): 03/08/2013

### Section 2
- Ensure employee’s name is entered in the space provided at the top.
- Complete both List B and List C completely.
- Enter employee’s first date of employment in space provided, this date should match the epaf.
- Complete employer section with your name and date documents were reviewed, no P.O. boxes or Mail Stops are allowed for the address.
- Section 2 must be completed within 3 business days of hire date.
There is more than one issuing authority for Social Security Cards, the most common are:

- Social Security Administration or
- Department of Health and Human Services
Ensure employee’s name is enter at the top of the page in space provided.

Complete List B and C completely, using the exact title of the documents provided.

Enter date of hire in space provided, this date should match your epaf date.

Complete the employer section with your name, title, date the documents were reviewed, and address. No P.O. Boxes or Mail Stops are allowed.

Section 2 must be completed within 3 business days from the date of hire.
Example of Birth Certificate

- Exact Document Title
- Document/File Number
- Issuing Authority
Reverifications

- Departments will receive letters notifying them of I-9 expirations.
- When a reverification is required, use a new form while only completing section 3 on Form I-9.
- Employee’s may present different documents during the reverification process.
- Handwrite the employee’s R# at the top of the page and ensure their name is in the space provided.
Reverification of EAD

R# handwritten at the top of the page.

Name entered in the space provided.

Section 3 completed and signed by you as the employer.
Place employee’s R# and Name at the top of the page.

In order to record all documents needed, please place one document per box.
Acceptable receipt examples would include:

- Driver’s License/Identification Card
- Social Security card replacement receipt.

When the employee provides an acceptable receipt:

1. Record the document title in Section 2 of Form I-9
2. Write the word “receipt” and its document number in the “Document #” space.

When the employee presents the actual document:

1. Cross out the word “receipt” and any accompanying document number
2. Insert the number from the actual document presented
3. Initial and date the change.
Completing Form I-9 with the assistance of a Notary

If it is necessary to use a notary to assist in the completion of Form I-9 ... 

1. Employee completes Section 1
2. Notary completes Section 2 – Review and Verification of documents.
3. Notary completes Section 2 – Certification
   a. Notary signs his/her name, prints his/her, and fills in title as “notary”.
   b. Notary completes Business or Organization Name and address with TTU’s information.
4. Notary writes the appropriate date completed.

Please have the notary call HR Comp & Ops and we will walk them through the process!
E-Verify is used only for employees who are compensated by Federal Contract Funds.

Contact The Office of Research Services (ORS) with any questions regarding if the E-Verify process should be used. #742-3915

Contact HR Comp & Ops to be given access to E-Verify.

Jill Calcote- jill.calcote@ttu.edu or Lacey Ellis- lacey.ellis@ttu.edu
Kenexa I-9 wizard

- I-9 process remains the same
- Always verify original documents
- Make copies and attach to system
- Remember to look over Section 1 (employee) for any errors
A few document reminders:

- All documents must be unexpired.
- You must verify the actual document, copies and faxes are not acceptable.
- Metal or plastic reproductions of a social security card are not acceptable.
- Some documents such as social security cards and birth certificates do not contain expiration dates and should be treated as unexpired.
Avoiding Common Errors

- If anyone other than the employee enters any data in Section 1, be sure they complete the preparer certification.
- Employee and employer must follow the **One Day and Three Day Rule**.
- Complete List A using the passport date, **do not** use the visa page.
- Do not use copies or faxes to complete the I-9, use original documents only.
- Foreign passports commonly list dates as day-mo-yr. The I-9 requires the date format to be mo-day-yr.
- When documenting SS cards, look at the issuing authority stamp in the background of the SS card.
- There must be a physical address listed for Texas Tech – no PO Boxes or Mail Stops.
Correcting Errors

- Draw a single line through the incorrect information.
- Date and initial by person making the correction.
- Never use white out or completely black out incorrect information.
- Write missing information or correct information nearby.
- Never backdate.
# Penalties

## Civil Fines and Criminal Penalties for Form I-9 Violations

<table>
<thead>
<tr>
<th>Civil Violations</th>
<th>First Offense</th>
<th>Second Offense</th>
<th>Third Offense</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Minimum</td>
<td>Maximum</td>
<td>Minimum</td>
</tr>
<tr>
<td>Hiring or continuing to employ a person, or recruiting or referring for a fee, knowing that the person is not authorized to work in the United States.</td>
<td>$375 for each worker.</td>
<td>$3,200 for each worker.</td>
<td>$3,200 for each worker.</td>
</tr>
<tr>
<td>Failing to comply with Form I-9 requirements.</td>
<td>$110 for each form.</td>
<td>$1,100 for each form.</td>
<td>$110 for each form.</td>
</tr>
<tr>
<td>Committing or participating in document fraud.</td>
<td>$375 for each worker.</td>
<td>$3,200 for each worker.</td>
<td>$3,200 for each worker.</td>
</tr>
<tr>
<td>Committing document abuse.</td>
<td>$110 per violation.</td>
<td>$1,100 per violation.</td>
<td>$110 per violation.</td>
</tr>
<tr>
<td>Unlawful discrimination against an employment-authorized individual in hiring, firing, or recruitment or referral for a fee.</td>
<td>$375 per violation.</td>
<td>$3,200 per violation.</td>
<td>$3,200 per violation.</td>
</tr>
</tbody>
</table>

Asking an employee for money guaranteeing that the employee is authorized to work in the United States, also called an indemnity bond:

- Pay $1,100 for each bond the employee demanded.
- Refund the employee the full amount of the bond. If the employee cannot be found, this refund will go to the U.S. Treasury.

## Criminal Violations

<table>
<thead>
<tr>
<th>Criminal Violations</th>
<th>First Offense</th>
<th>Second Offense</th>
<th>Third Offense</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engaging in a pattern or practice of hiring, recruiting or referring for a fee unauthorized aliens.</td>
<td>• Up to $3,000 for each unauthorized alien.</td>
<td>• Up to $3,000 for each unauthorized alien.</td>
<td>• Up to $3,000 for each unauthorized alien.</td>
</tr>
<tr>
<td></td>
<td>• Up to 6 months in prison for the entire pattern or practice.</td>
<td>• Up to 6 months in prison for the entire pattern or practice.</td>
<td>• Up to 6 months in prison for the entire pattern or practice.</td>
</tr>
</tbody>
</table>
If you have a situation that does not fall into one of the scenarios addressed in this presentation — or if you have any questions at all, please call Human Resources Comp and Ops for assistance before you submit the I-9 packet.

Human Resources Comp & Ops
742-3851
hrs.compensation.operations@ttu.edu
QUESTIONS
Sally Doe has filled out section 1 of the Form I-9. She has presented an unexpired United States Passport as her document of choice. Please fill in Section 2 of the Form I-9.

**United States Passport**

Number: 1234567
Name: Doe, Sally I
DOB 01/01/1975

Valid Dates:
01/01/2012 to 01/01/2032
Section 2. Employer or Authorized Representative Review and Verification

(1) [Signature]

List A: Identity and Employment Authorization

<table>
<thead>
<tr>
<th>Document Title</th>
<th>Document Title</th>
<th>Document Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security Number</td>
<td>Social Security Number</td>
<td>Social Security Number</td>
</tr>
<tr>
<td>Document Number</td>
<td>Document Number</td>
<td>Document Number</td>
</tr>
<tr>
<td>Expiration Date (mm/dd/yyyy)</td>
<td>Expiration Date (mm/dd/yyyy)</td>
<td>Expiration Date (mm/dd/yyyy)</td>
</tr>
</tbody>
</table>

List B: Identity

<table>
<thead>
<tr>
<th>Document Title</th>
<th>Document Title</th>
<th>Document Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Driver's License</td>
<td>Driver's License</td>
<td>Driver's License</td>
</tr>
<tr>
<td>Document Number</td>
<td>Document Number</td>
<td>Document Number</td>
</tr>
<tr>
<td>Expiration Date (mm/dd/yyyy)</td>
<td>Expiration Date (mm/dd/yyyy)</td>
<td>Expiration Date (mm/dd/yyyy)</td>
</tr>
</tbody>
</table>

List C: Employment Authorization

<table>
<thead>
<tr>
<th>Document Title</th>
<th>Document Title</th>
<th>Document Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document Number</td>
<td>Document Number</td>
<td>Document Number</td>
</tr>
<tr>
<td>Expiration Date (mm/dd/yyyy)</td>
<td>Expiration Date (mm/dd/yyyy)</td>
<td>Expiration Date (mm/dd/yyyy)</td>
</tr>
</tbody>
</table>

(2) [Signature]

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: [Date]

[Signature]

Section 3. Reverification and Rehires

(To be completed and signed by employer or authorized representative.)

A. [Employee Name] (Any Name) | [Employee Name] (Any Name) | [Employee Name] (Any Name)

B. [State] | [City or Town] | [County]

C. [Employee's previous or current employer's name] has agreed to provide the information for the document(s) listed above.

[Signature]

(3) [Signature]

Page 8 of 9
Michael Doe has filled out Section I. He has presented an unexpired foreign passport, DS-2019, and an I-94 as his documents of choice. Please fill in Section 2 of the Form I-9.

<table>
<thead>
<tr>
<th>Foreign Passport</th>
<th>I-94</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Country:</strong> Test Country</td>
<td><strong>Number:</strong> 98765432101</td>
</tr>
<tr>
<td><strong>Number:</strong> 1234567</td>
<td><strong>Name:</strong> Doe, Michael A</td>
</tr>
<tr>
<td><strong>Name:</strong> Doe, Michael A</td>
<td><strong>Country of Citizenship:</strong> Any Country</td>
</tr>
<tr>
<td><strong>DOB:</strong> 01/01/1975</td>
<td><strong>Expiration date:</strong> D/S</td>
</tr>
<tr>
<td><strong>Valid Dates:</strong> 01/01/12 to 01/01/2032</td>
<td></td>
</tr>
</tbody>
</table>

**Extraction:**

<table>
<thead>
<tr>
<th><strong>Section 1. Employee Information and Attestation</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>(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.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Last Name (Family Name)</th>
<th>First Name (Given Name)</th>
<th>Middle Initial</th>
<th>Other Names Used (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doe</td>
<td>Michael</td>
<td>A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (Street Number and Name)</th>
<th>Apt. Number</th>
<th>City or Town</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>4567 89th Circle</td>
<td>N/A</td>
<td>Lubbock</td>
<td>TX</td>
<td>797409</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Birth (mm/dd/yyyy)</th>
<th>U.S. Social Security Number</th>
<th>E-mail Address</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/01/1975</td>
<td>N/A</td>
<td>optional</td>
<td>optional</td>
</tr>
</tbody>
</table>

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):

- [ ] A citizen of the United States
- [ ] A lawful permanent resident (Alien Registration Number/USCIS Number): __________________________
- [x] An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy) 01/01/2015. Some aliens may write "N/A" in this field. (See instructions)

For aliens authorized to work, provide your Alien Registration Number/USCIS Number or Form I-94 Admission Number:

1. Alien Registration Number/USCIS Number: __________________________

OR

2. Form I-94 Admission Number: 98765432101

If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

<table>
<thead>
<tr>
<th>Foreign Passport Number:</th>
<th>Country of Issuance:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1234567</td>
<td>Test Country</td>
</tr>
</tbody>
</table>

Some aliens may write "N/A" on the Foreign Passport Number and Country of Issuance fields. (See instructions)

Signature of Employee: Michael Doe

Date (mm/dd/yyyy): 03/08/2013
### Practice- J1 Solution

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

Employee’s or their authorized representative must complete and sign. Section 3 will be filled out at the employee’s first day of employment. You must attach all required documents from List A OR examine a combination of one document from List B and one document from List C listed on the Top of this Document. If not, see the next page of the form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.

<table>
<thead>
<tr>
<th>List A Identity and Employment Authorization</th>
<th>OR</th>
<th>List B Identity</th>
<th>AND</th>
<th>List C Employment Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document Title:</td>
<td></td>
<td></td>
<td></td>
<td>Document Title:</td>
</tr>
<tr>
<td>Visiting Authority:</td>
<td></td>
<td></td>
<td></td>
<td>Document Title:</td>
</tr>
<tr>
<td>Work Country:</td>
<td></td>
<td></td>
<td></td>
<td>Document Title:</td>
</tr>
<tr>
<td>Document Number:</td>
<td></td>
<td></td>
<td></td>
<td>Document Title:</td>
</tr>
<tr>
<td>#31740571</td>
<td></td>
<td></td>
<td></td>
<td>Document Title:</td>
</tr>
<tr>
<td>Expiration Date (mm/dd/yyyy):</td>
<td></td>
<td></td>
<td></td>
<td>Document Title:</td>
</tr>
<tr>
<td>01/20/2023</td>
<td></td>
<td></td>
<td></td>
<td>Document Title:</td>
</tr>
</tbody>
</table>

- **Issuing Authority:**
- **Document Number:** #31740571
- **Expiration Date:** 01/20/2023

3-D Barcode: Do Not Write In This Space

#### 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): 03/08/2013

<table>
<thead>
<tr>
<th>(See Instructions for exemptions.)</th>
</tr>
</thead>
</table>

**Signature of Employer or Authorized Representative:**

Signature: [Signature]

Date (mm/dd/yyyy): 03/08/2013

Title of Employer or Authorized Representative:

Texas Tech University

#### Section 3. Reconciliation and Rehires

A. New Name (If applicable): Last Name (Family Name) First Name (Given Name)

<table>
<thead>
<tr>
<th>Last Name (Family Name)</th>
<th>First Name (Given Name)</th>
<th>Employer’s Business or Organization Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Texas Tech University</td>
</tr>
</tbody>
</table>

**Employer’s Address:** 2500 Broadway, Lubbock, TX 79409

-----------------------------------------

**Signature of Employer or Authorized Representative:**

Signature: [Signature]

Date (mm/dd/yyyy): [Date]

Print Name of Employer or Authorized Representative: [Name]
Please take a moment to fill out your evaluation. We appreciate your feedback!