GKC IPMA HR Spring Conference





Leyla McMullen Business Immigration Attorney

Disclaimer

The information provided during the course of this training is not legal advice. It is general information regarding law and policy that may be applicable to your particular HR issue or legal problem.

Communication during the course of this training does not create an attorney-client relationship. For specific advice you can rely upon, please contact your attorney.

What We Will Cover Today

- Form I-9: Why Proper I-9

 Administration is Important
- Discussion of the latest I-9
 Enforcement and Cases
- How to Execute an I-9 Properly
- Top Ten Mistakes to Avoid
- Counterfeit Documents

What is What....





IRCA Prohibited Conduct



IRCA Obligations



The I-9



Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

TISCIS Form L9

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.) Middle Initial Last Name (Family Name) First Name (Given Name) Other Last Names Used (if any) Address (Street Number and Name) Apt. Number City or Town ZIP Code U.S. Social Security Number Date of Birth (mm/dd/vvvv) 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): 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/vvvv); 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: 2 Form I-94 Admission Number 3. Foreign Passport Number Country of Issuance: Signature of Employee Today's Date (mm/dd/yyyy) Preparer and/or Translator Certification (check one): A preparer(s) and/or translator(s) assisted the employee in completing Section 1. I did not use a preparer or translator. (Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.) l 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) State ZIP Code City or Town Address (Street Number and Name)



Employment Eligibility Verification

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

USCIS Form L9 OMB No. 1615-0047 Expires 10/31/2022

Employee Info from Section 1	Last Name (Famil	y Name)	First Name (Giv	en Name)	M.I.	Citizer	nship/Immigration State
List A Identity and Employment Au	OR thorization		List B Identity	AND		Emple	List C
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Form I-9 Basics



IMMIGRATION COMPLIANCE ROLES

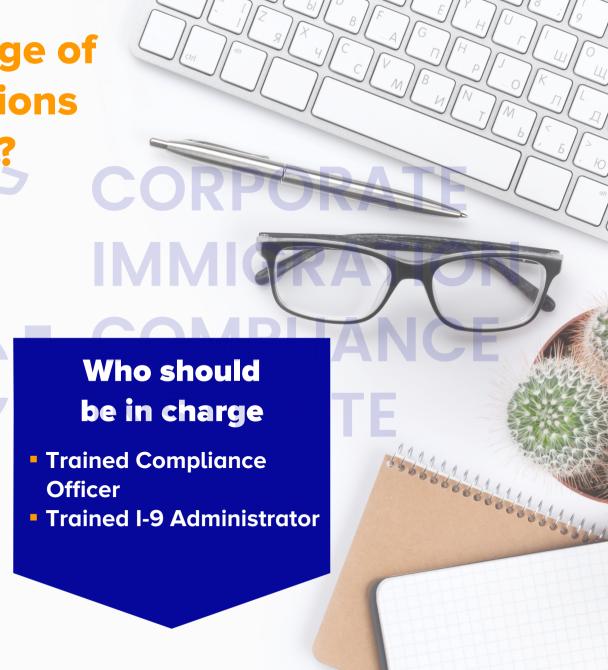
CORPORATE

- Immigration Compliance Officer
- I-9 Administrator
- I-9 Auditor PLANCE
 - In Your Corner (Not ICE):
 - **External or In-House**

Who is in charge of IRCA obligations and audit?

Shouldn't be in charge

- Receptionist
- Site manager
- Least experienced HR



What's the BIG DEAL?



U.S. Immigration and Customs
Enforcement

- ICE Enforcement then and now
- ICE Best Employment
 Practices/IMAGE program
- Constructive Knowledge
- 2009 ICE Worksite
 Enforcement Memo

2009 ICE Worksite Enforcement Memo

Office of Investigations

U.S. Department of Homeland Security 500 12th Street, SW Washington, DC 20536

APR 3 0 2009



MEMORANDUM FOR: Assista

Assistant Director Deputy Assistant Directors

Special Agents in Charge

Marcy M. Forman
Director, Office of Investigations

SUBJECT:

FROM:

Worksite Enforcement Strategy

Worksite Enforcement Strategy

I. The Purpose and Priorities of Worksite Enforcement

The prospect for employment in the United States continues to be one of the leading causes of illegal immigration, creating a market for criminal smuggling organizations who exploit people willing to pay high fees and take great risks to enter the United States without detection. Immigration and Customs Enforcement (ICE) has a vital responsibility to engage in effective worksite enforcement to reduce the pull of illegal employment, ease pressure at the border, and protect employment opportunities for the nation's lawful workforce.

DHS has extensive but finite resources which it must effectively allocate. Arresting and removing illegal workers must be part of a strategy to deter unlawful employment, but alone is insufficient as a comprehensive worksite enforcement strategy. Of the more than 6,000 arrests related to worksite enforcement in 2008, only 135 were of employers. Enforcement efforts focused on employers better target the root causes of illegal immigration. An effective strategy must do all of the following: 1) penalize employers who knowingly hire illegal workers; 2) deter employers who are tempted to hire illegal workers; and 3) encourage all employers to take advantage of well-crafted compliance tools. To accomplish these goals, ICE must prioritize the criminal prosecution of the actual employers who knowingly hire illegal workers because such employers are not sufficiently punished or deterred by the arrest of their illegal workforce.

Although criminal prosecution of employers will efficiently advance the stated goal of worksite enforcement, ICE will not rely solely on that approach. ICE will continue to fulfill its responsibility to arrest and process for removal illegal workers encountered during worksite enforcement operations. Furthermore, ICE will use all available civil and administrative tools, including civil fines and debarment, to penalize and deter illegal employment.

SUBJECT: Worksite Enforcement Strategy

ICE will strategically approach worksite enforcement efforts to maximize their impact. To that end, ICE offices should refer to this Worksite Enforcement Strategy when beginning any worksite enforcement investigation. ICE offices also must refer to the reporting requirements and humanitarian guidelines applicable to worksite enforcement operations.

II. Criminal Prosecution of Employers

- The criminal prosecution of employers¹ is a priority of ICE's worksite enforcement (WSE) program and interior enforcement strategy.
- ICE is committed to targeting employers, owners, corporate managers, supervisors, and
 others in the management structure of a company for criminal prosecution through the
 use of carefully planned criminal investigations.
- ICE offices should utilize the full range of reasonably available investigative methods and techniques, including but not limited to: use of confidential sources and cooperating witnesses, introduction of undercover agents, consensual and nonconsensual intercepts and Form I-9 audits.
- ICE offices should consider the wide variety of criminal offenses that may be present in
 a worksite case. ICE offices should look for evidence of the mistreatment of workers,
 along with evidence of trafficking, smuggling, harboring, visa fraud, identification
 document fraud, money laundering, and other such criminal conduct.
- Absent exigent circumstances, ICE offices should obtain indictments, criminal arrest or search warrants, or a commitment from a U.S. Attorney's Office (USAO) to prosecute the targeted employer before arresting employees for civil immigration violations at a worksite. In the absence of a timely commitment from a USAO, ICE offices should obtain guidance from ICE Headquarters prior to proceeding with a worksite enforcement operation.

III. Administrative and Civil Tools

ICE offices should use administrative tools to advance criminal cases and, in the absence of criminal charges, to support the imposition of civil fines or other available penalties.

A. Form I-9 Audits

The most important administrative tool is the Notice of Inspection (NOI) and the resulting administrative Form I-9 audit.

- The Form I-9 audit process will be utilized in both criminal and administrative investigations to identify illegal workers, including criminal aliens employed at a business.
- Although auditors will assume primary responsibility for conducting Form I-9 audits, ICE special agents and auditors must coordinate closely because this process will often serve as an important step in the criminal investigation and prosecution of employers.

¹ In this context, "employer" refers to someone involved in the hiring or management of employees. This includes owners, CEOs, supervisors, managers and other occupational titles.

2009 ICE Worksite Enforcement Memo

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Bravos Group and Specialty Food Distribution

- 64 count criminal indictment of Owners and Managers
- Alleged "Employing and Harboring"
- ICE audits in 2018 and 2019 alleged I-9 errors and unauthorized employment
- Ongoing Case





Non-Prosecution Agreement for Owners

- Forfeit nearly \$2 million in fines
- Agreed to spend \$500,000 on immigration compliance

"...several lower-level Grand America employees and mid-level managers conspired to rehire unauthorized workers." –ICE News Release



- Settled for \$3 million following ICE part and DHS investigations.
- CFO sentenced to 3 months federal prison and \$69,000 in fines.
- Two other employees are facing up to 6 months and \$69,000 fines.





CORPORATE

- Watermarked form from ICE
- Self-Corrected/Audited
- Well-meaning, Untrained Manager
- \$1,000+ per I-9 NSTITUTE

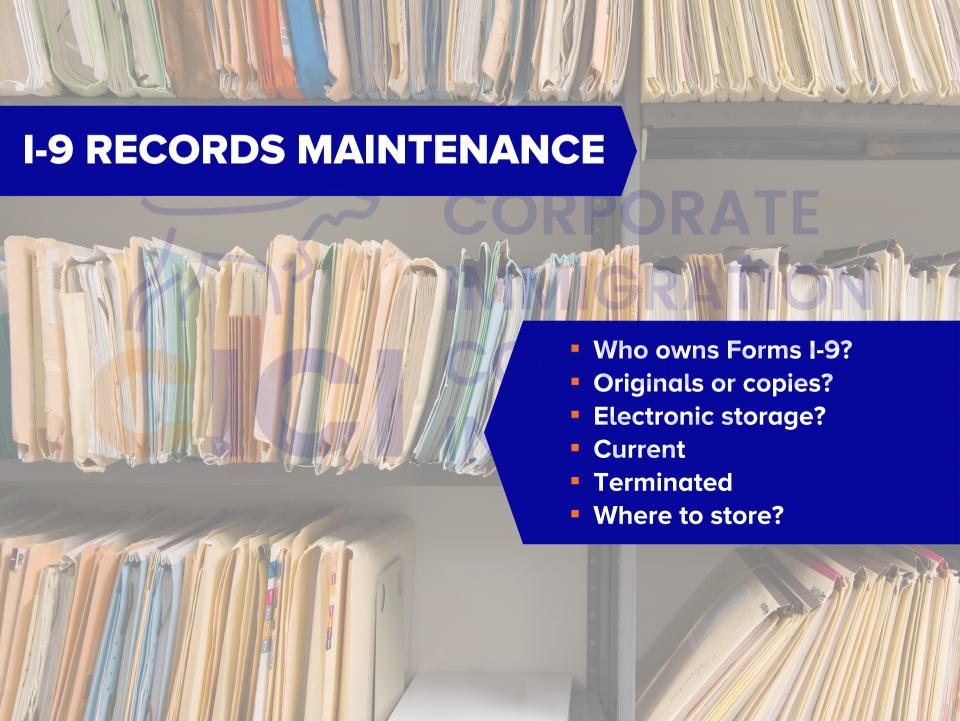






- 2 Years Monitoring
- No Unauthorized Workers
- I-9 Software/Vendors





New Form I-9

Always check online for the latest version of the form

www.uscis.gov/i-9

Forms Information

Filing Fees

File Online

Forms Updates

Department of State (DS) and Other Non-USCIS Forms





Español



Close All Open All



Form I-9 Time Frame

Section 1 – First Day of Employment

- Offer of Employment
- Acceptance
- Employee presents themselves for Employment Related Duties

Section 2 - Within 3 Business Days E-Verify - Within 3 Business Days



Last Name (Family Name)

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

Other Last Names Used (if any)

▶ 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.

Middle Initial

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

First Name (Given Name)

than the first day of employment, but not before accepting a job offer.)

The second secon			
Address (Street Number and Name) Apt. N	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	s Telephone Number
am aware that federal law provides for imprisonment connection with the completion of this form. attest, under penalty of perjury, that I am (check one		nts or use of false d	ocuments in
1. A citizen of the United States	e of the following boxes).		
A noncitizen national of the United States (See instruction	ns)		
3. A lawful permanent resident (Alien Registration Number	er/USCIS Number):		
4. An alien authorized to work until (expiration date, if app Some aliens may write "N/A" in the expiration date field.	The state of the s		
Aliens authorized to work must provide only one of the followin, An Alien Registration Number/USCIS Number OR Form I-94 A 1. Alien Registration Number/USCIS Number: OR		n 1-9:	QR Code - Section 1 Not Write in This Space
2. Form I-94 Admission Number:			
OR 3. Foreign Passport Number:			
Country of Issuance:			
Signature of Employee	Today's	Date (mm/dd/yyyy)	$\overline{}$
Preparer and/or Translator Certification (che I did not use a preparer or translator. A preparer(s) a Fields below must be completed and signed when preparer	and/or translator(s) assisted the employe		
attest, under penalty of perjury, that I have assisted nowledge the information is true and correct.	in the completion of Section 1 o	f this form and that	to the best of my
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Signature of Preparer or Translator ast Name (Family Name)	First Name (Given Nar		(aa/yyyy)



Employment Eligibility Verification

Department of Homeland Security

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

U.S. Citizenship and Immigration Services

Employee Info from Section 1	t Name (Family Name)	First	Name (Given Na	me) M.I	. Citize	nship/Immigration Stat
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Document Title	Document Tit	tle		Document	Title	
Issuing Authority	Issuing Autho	eib.		Issuing Aut	th a rite :	
issuing Additionly	Issuing Addic	arity		Issuing Au	inonty	
Document Number	Document Nu	ımber		Document	Number	
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Document Title						
Issuing Authority	Additional	Information				Code - Sections 2 & 3 of Write in This Space
Document Number						
Expiration Date (if any) (mm/dd/yyyy)						
Document Title						
ssuing Authority						
Document Number						
Expiration Date (if any) (mm/dd/yyyy)						
Certification: I attest, under penalt 2) the above-listed document(s) a employee is authorized to work in	ppear to be genuine and the United States.	d to relate to th	e employee nar	med, and (3) t	o the bes	t of my knowledge
The employee's first day of emp	Addition to the second		- 100	instructions	200 (A)	
Signature of Employer or Authorized Re	epresentative	Today's Date (mi	n/dd/yyyy) Titl	le of Employer	or Authoria	zed Representative
Last Name of Employer or Authorized Repr	esentative First Name of E	Employer or Author	ized Representative	Employer's	Business	or Organization Nam
Employer's Business or Organization A	ddress (Street Number an	d Name) City	or Town		State	ZIP Code
Section 3. Reverification and	Rehires (To be comp	oleted and sign	ed by employer	or authorized	represei	ntative.)
A. New Name (if applicable)				B. Date of R		
Last Name (Family Name)	First Name (Given N	ame)	Middle Initial	Date (mm/de	d/yyyy)	
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The second secon		Document Nu	-	112	1000	ate (if any) (mm/dd/yy)

Form I-9 Employee Page



Employment Eligibility Verification Department of Homeland Security

U.S. Citizenship and Immigration Services

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than the first day of employment, but					CONTRACTOR OF THE PROPERTY OF
Last Name (Family Name)	First Name (Given N	ame)	Middle Initial	Other Last Name	es Used (if any)
Address (Street Number and Name)	Apt. Numbe	er City or Town		State	ZIP Code
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2. A noncitizen national of the United St	ates (See instructions)				
3. A lawful permanent resident (Alien	Registration Number/US0	CIS Number):			
Some aliens may write "N/A" in the ex Aliens authorized to work must provide only An Alien Registration Number/I ISCIS Num	y one of the following doc	ument numbers to		7. Do	QR Code - Section 1 Not Write In This Space
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Aliens authorized to work must provide only An Alien Registration Number/USCIS Number/USCIS Number/USCIS Number/USCIS Number/USCIS Number/OR 2. Form I-94 Admission Number: OR 3. Foreign Passport Number:	y one of the following doc ber OR Form I-94 Admiss	ument numbers to	oreign Passport Ni	7. Do	QR Code - Section 1 Not Write in This Space
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Aliens authorized to work must provide only An Alien Registration Number/USCIS Number/USCIS Number/USCIS Number/USCIS Number/USCIS Number: OR 2. Form I-94 Admission Number: OR 3. Foreign Passport Number: Country of Issuance: Signature of Employee Preparer and/or Translator Cell I did not use a preparer or translator. (Fields below must be completed and statest, under penalty of perjury, that knowledge the information is true and	y one of the following doc ber OR Form I-94 Admiss ber: rtification (check A preparer(s) and/or igned when preparers	one): translator(s) assiste and/or translators e completion of	Today's Dated the employee in	te (mm/dd/yyyy) completing Section loyee in completin	Not Write in This Space

Form I-9 Employer 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

nployee Info from Section 1	ne (Family Name)		FIRSTIN	ame (Given N	lame)	M.I.	Citize	nship/Immigration Status
List A Identity and Employment Authorization	OR	List Iden			AND		Emp	List C oyment Authorization
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suing Authority	Issuing Aut	hority			Issu	ing Autho	rity	
ocument Number	Document	Number			Doc	ument Nu	ımber	
opiration Date (if any) (mm/dd/yyyy)	Expiration I	Date (if any) (mm/dd/	(ww)	Exp	ration Da	te (if ar	y) (mm/dd/yyyy)
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xpiration Date (if any) (mm/dd/yyyy)								
ocument Title								
suing Authority						╟		
ocument Number						1		
opiration Date (if any) (mm/dd/yyyy)								
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ertification: I attest, under penalty of the above-listed document(s) appea	r to be genuine a							
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gnature of Employer or Authorized Repres		Today's Da	e (mm/	- 100		0.572.010	201000	zed Representative

st Name of Employer or Authorized Represent	ative First Name o	f Employer or i	Authorize	ed Representati	ve Em	oloyer's B	usiness	or Organization Name
nployer's Business or Organization Addres	ss (Street Number a	and Name)	City or	Town		St	tate	ZIP Code
ection 3. Reverification and Re	hires (To be con	npleted and	signed	i by employe	_			
New Name (if applicable) ast Name (Family Name)	First Name (Given	Name)	1	Middle Initial	-	te of Rehi (mm/dd/y		pplicable)
	vment authorization	has expired,	provide	the informati	on for the	documen	t or rec	eipt that establishes
If the employee's previous grant of employ ntinuing employment authorization in the s		184						

Form I-9 Anti-Discrimination Notice





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Form I-9 List of Acceptable Documents

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	LIST B Documents that Establish	LIST C Documents that Establish		
	Both Identity and Employment Authorization	Identity	Employment Authorization		
1.	U.S. Passport or U.S. Passport Card	Driver's license or ID card issued by a	1. A Social Security Account Number		
2.	Permanent Resident Card or Alien Registration Receipt Card (Form I-551)	State or outlying possession of the United States provided it contains a photograph or information such as	card, unless the card includes one of the following restrictions:		
3.	Foreign passport that contains a	name, date of birth, gender, height, eye color, and address	(1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH		
35	temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa	ID card issued by federal, state or local government agencies or entities,	(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION		
4.	Employment Authorization Document that contains a photograph (Form I-768)	provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)		
5	For a nonimmigrant alien authorized	3. School ID card with a photograph	Original or certified copy of birth		
	to work for a specific employer	Voter's registration card	certificate issued by a State,		
	because of his or her status: a. Foreign passport; and	5. U.S. Military card or draft record	county, municipal authority, or territory of the United States		
	b. Form I-94 or Form I-94A that has	6. Military dependent's ID card	bearing an official seal		
	the following:	7. U.S. Coast Guard Merchant Mariner	4. Native American tribal document		
	(1) The same name as the passport; and	Card	5. U.S. Citizen ID Card (Form I-197)		
	(2) An endorsement of the alien's	Native American tribal document	6. Identification Card for Use of		
	nonimmigrant status as long as that period of endorsement has	eriod of endorsement has government authority			
	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.	For persons under age 18 who are unable to present a document listed above:	Employment authorization document issued by the Department of Homeland Security		
6.	Passport from the Federated States of Micronesia (FSM) or the Republic	10. School record or report card			
	of the Marshall Islands (RMI) with	11. Clinic, doctor, or hospital record			
	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	12. Day-care or nursery school record			



Employee Information

CORPORATE

Section 1. Employee Information than the first day of employment, but not		ust complete and s	ign Section 1 of Form I-9 no later
Last Name (Family Name)	First Name (Given Name)	Middle Initial C	Other Last Names Used (if any)
Address (Street Number and Name)	Apt. Number City or Town	МРЦ	State ZIP Code
Date of Birth (mm/dd/yyyy) U.S. Social Sec	curity Number Employee's E-mail Add	dress	Employee's Telephone Number

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 periury, 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 "N/A" in the expiration date field. (See instructions) QR Code - Section 1 Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: Do Not Write In This Space 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: Signature of Employee Today's Date (mm/dd/yyyy)

Preparer / Translator Certification

	CORPC	RATE	
Preparer and/or Translator Certification (ch	neck 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 prep	parers and/or translators assist an em	ployee in completing Section 1.)	
I attest, under penalty of perjury, that I have assisted knowledge the information is true and correct.	d in the completion of Section 1 of t	this form and that to the best of my	
Signature of Preparer or Translator	COMPL	Today's Date (mm/dd/yyyy)	
Last Name (<i>Family Name</i>)	First Name (Given Nam	e)	
	INICTITI	ITE .	
Address (Street Number and Name)	City or Town	State ZIP Code	



- MUST be completed by the Employee
- Full legal name, as show on the Identity Document
- Other Names Used
- RESIDENTIAL address, and birthdate
- Check one immigration status attestation
- Alien registration number/USCIS Number
- Complete Form at time of hire
- Check a box in Preparer/Translator
- Certification Corrections may only be made by the Employee

Employee Information

CORPORATE

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.")

Employee Info from Section 1

Last Name (Family Name)

First Name (Given Name)

M.I.

Citizenship/Immigration Status



In Section 2, Employers now must record the citizenship/immigration status attested to in Section 1

This will be a number 1-4

Identity & Employment Authorization

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title	Document Titl	e COD	Docume	ent Title
Issuing Authority	Issuing Author	rity	Issuing	Authority
Document Number	Document Nu	mber	Docume	ent Number
Expiration Date (if any)(mm/dd/yyyy)	Expiration Dat	te (if any)(mm/dd/yyyy)	Expiration	on Date (if any)(mm/dd/yyyy)
Document Title		COL	ADII	ANCE
Issuing Authority	Additional I	nformation		QR Code - Sections 2 & 3 Do Not Write In This Space
Document Number		INST	TTUT	ΠE
Expiration Date (if any)(mm/dd/yyyy)		11101		
Document Title				
Issuing Authority				
Document Number				
Expiration Date (if any)(mm/dd/yyyy)				

Section 2: Certification

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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):

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 Address (Street Number and Name)

City or Town

State

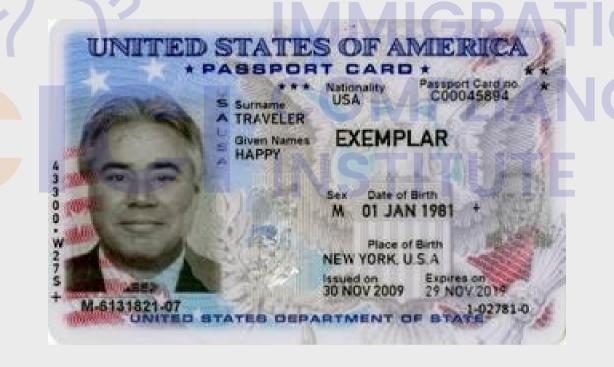
ZIP Code

List A Docs U.S. Passport



List A Docs U.S. Passport Card

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List A Docs Green Cards

PERMANENT RESIDENT CARD

NAME



Birthdate Category Sex 10/04/49 P26 M
Country of Buth Nepal CARD EXPIRES 11/01/2013
Resident Since 11/01/2003

C1USAO223456791EAC9730053465<<
4910040M9411014CAN<<<<<<<<
CRITTENDEN<<LEE<W<<<<<





List A Docs Employment Authorization Cards

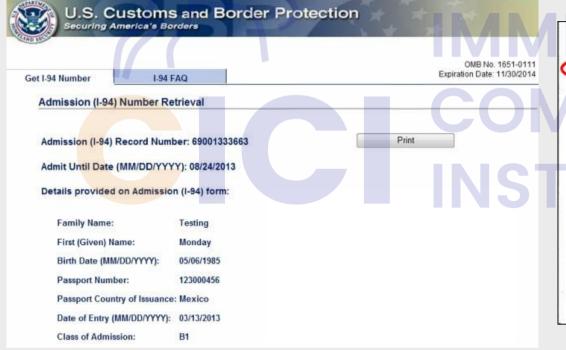




RPORATE

List A Docs I-94

CORPORATE



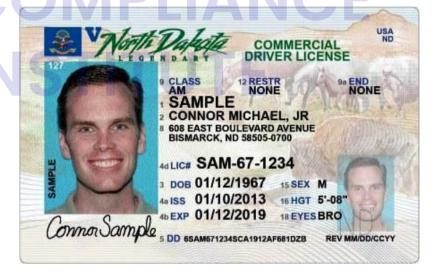


List B Docs

Driver Licenses - Student IDs







List C DocsSocial Security Cards





Document Receipt Rule

Commonly Used Acceptable Receipts:

- Receipt for replacement of lost, stolen, damaged document
- Ex. DL/SSC Receipts
- Valid for 90 Days from date of issue

How to Record in Section 2:

- Record Doc Title in Section 2
- Record word "Receipt" next to Doc Title
- Record expiration date that is 90 days from date of issue



- Employer's duty to EXAMINE documents
- Only documents listed on CURRENT
 Form I-9 list of acceptable documents
- UNEXPIRED, ORIGINAL documents only
- Acceptable documents
 - List A
 - List B and List C
 - Unacceptable documents
- Discrimination concerns
- Date of hire
- Name and title of I-9 Administrator
- Business name and address
- Complete Employer Attestation within three business days
- Sign the form



What if you or your employee make a mistake?

Section 1:

- Ask employee to draw a straight line through error
- Ask employee to write correct information
- Ask employee to initial and date the change

Section 2:

- Draw a straight line through the mistake
- Record correct information
- Initial (or sign) and date the correction

Section 3 Reverification and Rehires

A. New Name (if applicable)			B. Date of Rehire (if applicable)	
Last Name (Family Name)	First Name (Given Name)	Middle Initial Date	(mm/dd/yyyy)	
C. If the employee's previous grant continuing employment authorization	of employment authorization has expired in the space provided below.	, provide the information for the	document or receipt that establishes	
Document Title	Docume	ent Number	Expiration Date (if any) (mm/dd/yyyy)	
	, that to the best of my knowledge, ent(s), the document(s) I have exam		to work in the United States, and if and to relate to the individual.	

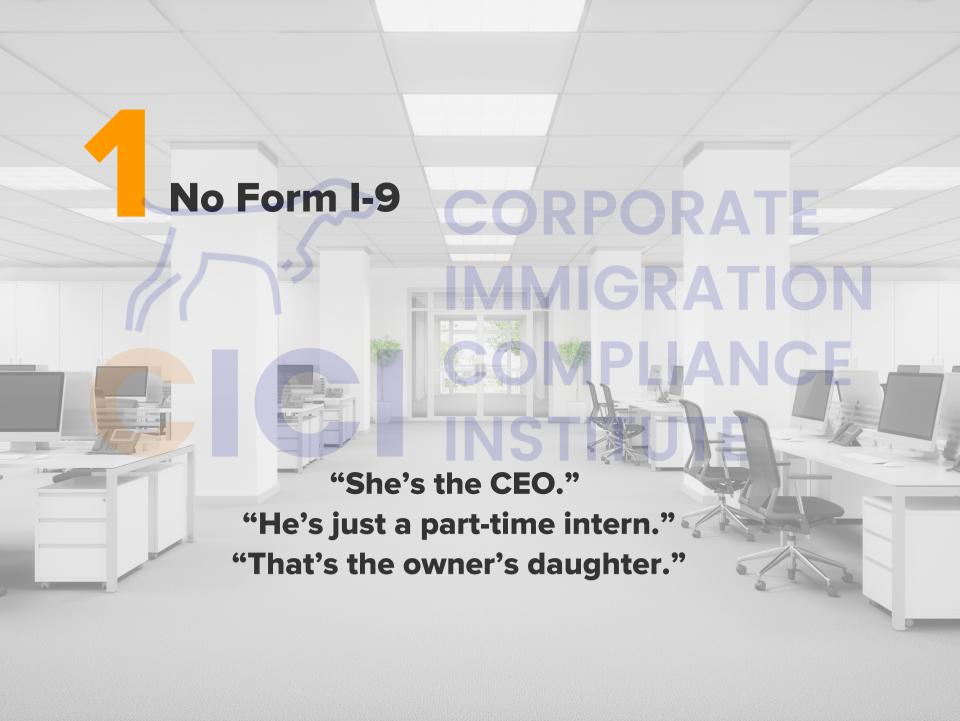
Section 3 Review

- When to use
 - New Name
 - Rehire
 - Employment Authorization Expires



TOP TEN MISTAKES

- 1. No Form I-9
- 2. Form is incomplete
- 3. Form contains incorrect information
- 4. Unacceptable documents
- 5. Over-documentation
- 6. Inconsistent photocopying
- 7. Names and birthdates don't match
- 8. Improper corrections
- 9. I-9s in personnel files
- File and forget it no re-verification, audit, or destruction policy



Form is Incomplete

"I don't need to check a box in Part 1; I'm not an alien."
"When was it you started working here?"

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INSTITUT

"I'm not sure about this, so I'll just leave it blank."



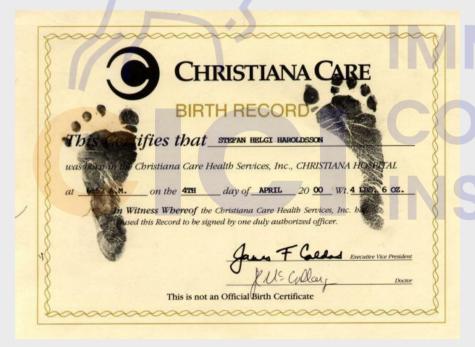
"What's today's date again?"

"My name is John Jacob Jingleheimer Jones, but everyone calls me JJ Jones for short."

"This is a Social Security card – obviously it was issued by Social Security."



Unacceptable Documents



"That Social Security card looks fine."

"Awww, what a cute birth certificate."

"Here's the fax from his mom."









Improper Corrections

"Let me get the white-out and I'll fix that."

"Can you hand me that Sharpie?"

"Just put the date you started next to your Signature, since we really should have

completed the form that day."





File & Forget it? No Re-Verification, Audit, or Destruction?

"These look like official documents. We'd better keep them in case we are audited."



How to Tell if the Document is Genuine or NOT

Document Examples

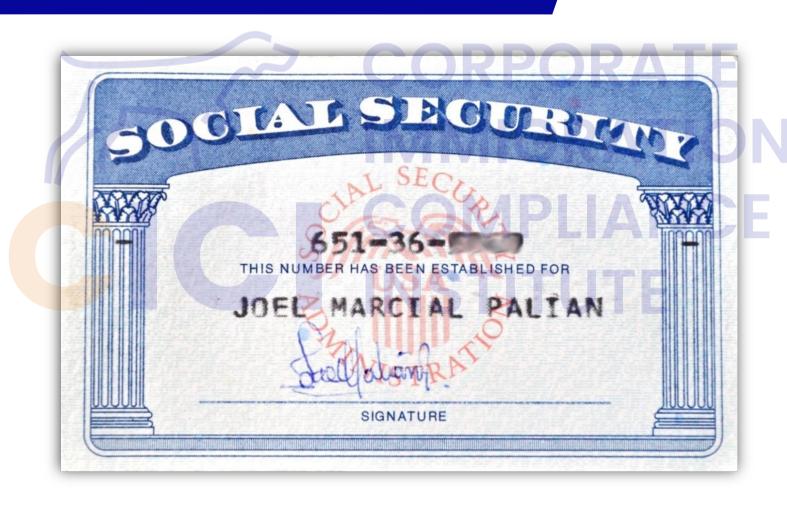


Permanent Resident Card

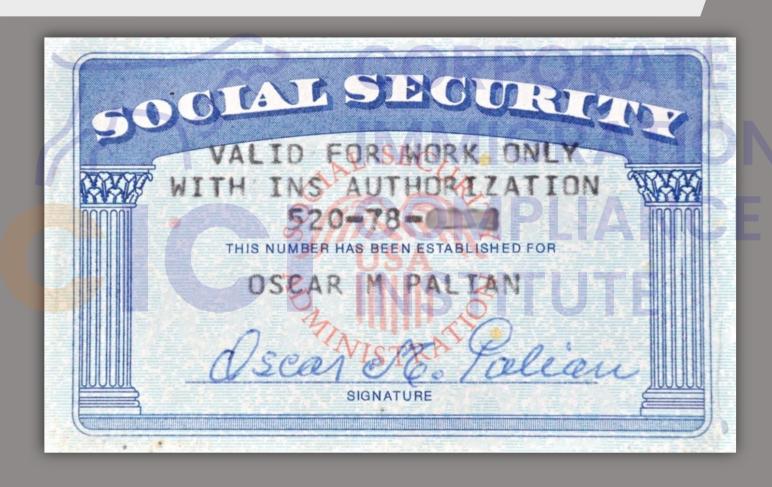


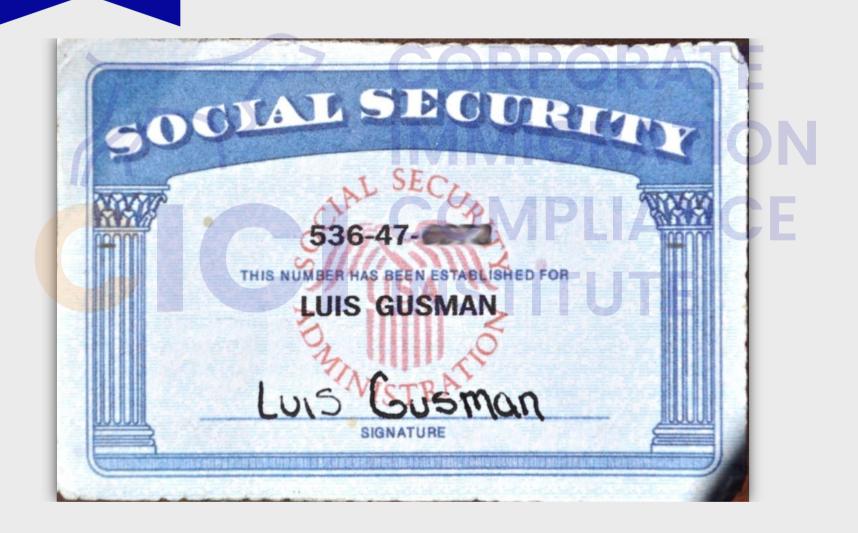
Social Security Card

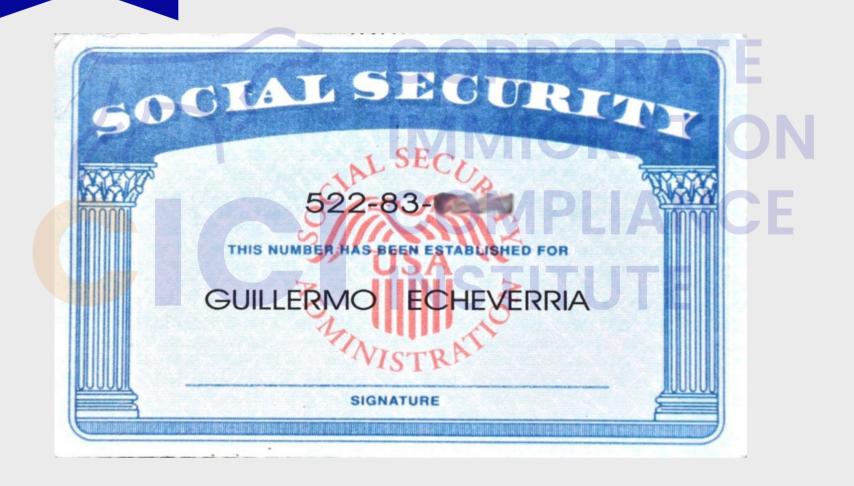
Genuine Social Security Card



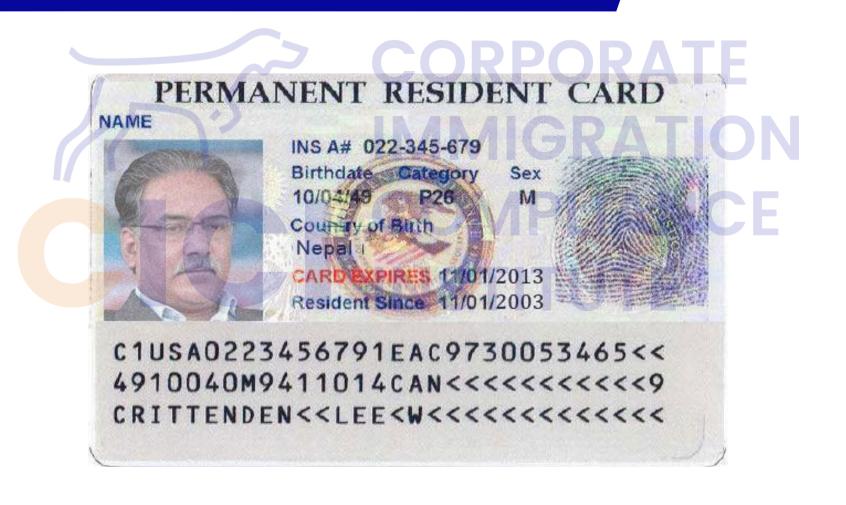
Genuine, but not good for I-9 purposes







Permanent Resident Card: C194



PERMANENT RESIDENT CARD

NAME CRITTENDEN, LEE W.



INS A# 022-345-679

Birthdate Category

10/04:49 P26 M

Coursey of Birth

Canada

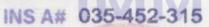
CARD EXPIRES 11/01/94

Resident Since 11/01/97

C1USA0223456791EAC9730053465<<
4910040M9411014CAN<<<<<<<<<
CRITTENDEN<<<LEE<W<<<<<<<

PERMANENT RESIDENT CARD

NAME BORREGO JIMENEZ, JAZIEL



Birthdate Sategory

09/05/70 S26

Country of Birth

Mexico

CARD EXPIRES 08/07/09

Resident Since 03/21/90

C1USA0354523154BOR340131511<<< 7009055M0908071MEX<<<<<<1 BORREGO<JIMENEZ<<JAZIEL<<<<<

PERMANENT RESIDENT CARD

NAME BORREGO JIMENEZ, JAZIEL



INS A# 035-452-315
Birthdate Sates by Sex 09/05/70 S26 M
Country of Birth Mexico
CARD EXPIRES 08/07/09
Resident Since 03/21/90

C1USA0354523154BOR340131511<<< 7009055M0908071MEX<<<<<<<1 BORREGO<JIMENEZ<<JAZIEL<<<<<

PERMANENT RESIDENT CARD

NAME ECHEVERRIA, GUILLERMO



INS A# 092-841-007
Birthdate Category Sex
07/29/57 SA1 M
Country of Birth
Mexico
CARD EXPIRES 09/03/13

Resident Since 12/01/97

PERMANENT RESIDENT CARD

NAME



INS A# 022-345-679
Birthdate Category Sex
10/04/49 P26 M
Country of Birth
Nepal
CARD EXPIRES 11/01/2013
Resident Since 11/01/2003

C1USA0223456791EAC9730053465<<
4910040M9411014CAN<<<<<<<><
CRITTENDEN<</E>

PERMANENT RESIDENT CARD

NAME GONZALEZ, NELSON C



C1USA0000000392SRC0000000039<< 2001010F8001022SLV<<<<<<< GONZALEZ<<NELSON<CARLA<<<<<<

USCIS Reaches Fiscal Year 2022 H-1B Cap

IMMIGRATION

- 65,000 H-1B visa regular cap
- 20,000 H-1B visa U.S. advanced degree exemption

USCIS Increases Automatic Extension Period of Work Permits for Certain Applicants









USCIS has announced a Temporary Final Rule that grants Automatic Extension of Employment Authorization Documents (EADs) for Certain Renewal Applicants!

The extension will be effective on May 4, 2022

- Increasing the 180 day extension to 540 days.
- This provides more certainty for businesses in retaining workers.



Leyla McMullen Business Immigration Attorney