

Are Your I-9s in Top Form? I-9 Fundamentals, Best Practices and Updates on the New I-9 Form, E-Verify and Remote Inspection Rule

Immigration Webinar

April 9, 2024

Fredrikson

Where Law and Business Meet[®]

Webinar Overview



- I-9 Enforcement Trends
- Current I-9 Version: Form I-9 Edition 08/01/2023
- Step-by-Step Completion of the Form I-9
- The Remote Inspection Rule
- Preparing and Protecting your Company in an I-9 Audit
- I-9 Compliance and E-Verify



Trends in I-9 Enforcement

What is the Purpose of Form I-9

The Immigration & Reform Control Act (IRCA) prohibits employers from hiring workers who are not authorized to work in the United States

Failure to comply with IRCA can result in civil and/or criminal penalties

What is the Purpose of I-9 Form

- The I-9 is the employment eligibility verification form for employers to confirm the **IDENTITY** and **EMPLOYMENT ELIGIBILITY** of new hires after November 6, 1986

I-9 Current Enforcement Trends-Homeland Security Investigation (HSI)

Notices of Inspection-I-9 Audits

- FY2022 - 624
- FY2023- 301
- FY2024-similar to FY2023

Audit Triggers-Tips and Complaints

Investigation -Focus Areas

- Labor exploitation
- Human trafficking

Immigrant and Employee Rights (IER) Investigations

I-9 Resources



The new Form I-9 can be downloaded at - <https://www.uscis.gov/i-9>



Fredrikson's I-9 Fast Facts



Handbook for Employers, Guidance for Completing Form I-9 – M274 - <https://www.uscis.gov/i-9-central/form-i-9-resources/handbook-for-employers-m-274>



I-9 Central Website - <https://www.uscis.gov/i-9-central>

A yellow decorative shape consisting of a horizontal bar on the left that tapers to a point on the right, positioned in the upper left corner of the dark blue background.

New Form I-9

The Form I-9: A Closer Look



One-page I-9 Form



Supplement A, Preparer/Translator Certification and Supplement B, Reverification and Rehire



Instructions embedded in I-9 Form



Drop-down menu for list of acceptable documents



Error messages when responses are inconsistent

The Form I-9: A Closer Look (continued)



Box for “additional information” includes checkbox when “alternative procedure authorized by DHS to examine documents” is used



Must still print and sign unless an electronic form is used

New Form I-9



Employment Eligibility Verification

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

USCIS
Form I-9
OMB No. 1615-0047
Expires 07/31/2026

START HERE. Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the [Instructions](#).

ANTI-DISCRIMINATION NOTICE. All employers can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in Section 1, or specify which acceptable documentation employees must present for Section 2 or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

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 Name)		Middle Initial (if any)		Other Last Names Used (if any)	
Address (Street Number and Name)		Apt. Number (if any)		City or Town		State ZIP Code	
Date of Birth (mm/dd/yyyy)		U.S. Social Security Number		Employee's Email Address		Employee's Telephone Number	
<p>I am aware that federal law provides for imprisonment and fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or immigration status, is true and correct.</p>							
<p>Check one of the following boxes to attest to your citizenship or immigration status (See page 2 and 3 of the instructions):</p> <p><input type="checkbox"/> 1. A citizen of the United States</p> <p><input type="checkbox"/> 2. A non-citizen national of the United States (See instructions.)</p> <p><input type="checkbox"/> 3. A lawful permanent resident (Enter USCIS or A-Number)</p> <p><input type="checkbox"/> 4. A noncitizen (other than Items Numbers 2. and 3. above) authorized to work until (exp. date, if any)</p> <p>If you check Item Number 4, enter one of these:</p> <p>USCIS A-Number <input type="checkbox"/> Form I-94 Admission Number <input type="checkbox"/> Foreign Passport Number and Country of Issuance <input type="checkbox"/></p>							
Signature of Employee		Today's Date (mm/dd/yyyy)					

If a preparer and/or translator assisted you in completing Section 1, that person MUST complete the [Preparer and/or Translator Certification](#) on Page 3.

Section 2: Employer Review and Verification. Employers or their authorized representative must complete and sign Section 2 within three business days after the employee's first day of employment, and must physically examine, or examine consistent with an alternative procedure authorized by the Secretary of DHS, documentation from List A OR a combination of documentation from List B and List C. Enter any additional documentation in the Additional Information box; see instructions.

Document Title	List A	List B	AND	List C	Additional Information
Document Title 1					
Issuing Authority					
Document Number (if any)					
Expiration Date (if any)					
Document Title 2 (if any)					
Issuing Authority					
Document Number (if any)					
Expiration Date (if any)					
Document Title 3 (if any)					
Issuing Authority					
Document Number (if any)					
Expiration Date (if any)					
<p>Check here if you used an alternative procedure authorized by DHS to examine documents.</p>					
<p>Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee; (2) the above-listed documentation appears 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.</p>					
Last Name, First Name and Title of Employer or Authorized Representative		Signature of Employer or Authorized Representative		Today's Date (mm/dd/yyyy)	
Employer's Business or Organization Name			Employer's Business or Organization Address, City or Town, State, ZIP Code		

For reverification or rehire, complete [Supplement B, Reverification and Rehire](#) on Page 4.
Form I-9 Edition 08/01/23 Page 1 of 4

LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired. * Documents extended by the issuing authority are considered unexpired. Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

Examples of many of these documents appear in the [Handbook for Employers \(M-274\)](#).

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Authorization
<ol style="list-style-type: none"> U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa Employment Authorization Document that contains a photograph (Form I-766) For an individual temporarily authorized to work for a specific employer because of his or her status or parole: <ol style="list-style-type: none"> Foreign passport, and Form I-94 or Form I-94A that has the following: <ol style="list-style-type: none"> The same name as the passport, and An endorsement of the individual's status or parole 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. 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 		<ol style="list-style-type: none"> 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 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 School ID card with a photograph Voter's 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 		<ol style="list-style-type: none"> A Social Security Account Number card, unless the card includes one of the following restrictions: <ol style="list-style-type: none"> NOT VALID FOR EMPLOYMENT VALID FOR WORK ONLY WITH INS AUTHORIZATION VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240) Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal Native American tribal document U.S. Citizen ID Card (Form I-197) Identification Card for Use of Resident Citizen in the United States (Form I-179) Employment authorization document issued by the Department of Homeland Security <p>For examples, see Section 7 and Section 13 of the M-274 at uscis.gov/i-9-central.</p> The Form I-766, Employment Authorization Document, is a List A, Item Number 4, document, not a List C document.
<p>Acceptable Receipts</p> <p>May be presented in lieu of a document listed above for a temporary period.</p> <p>For receipt validity dates, see the M-274.</p>				
<ul style="list-style-type: none"> Receipt for a replacement of a lost, stolen, or damaged List A document. Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual. Form I-94 with "RE" notation or refugee stamp issued to a refugee. 	OR	<ul style="list-style-type: none"> Receipt for a replacement of a lost, stolen, or damaged List B document. 	AND	<ul style="list-style-type: none"> Receipt for a replacement of a lost, stolen, or damaged List C document.

*Refer to the [Employment Authorization Extensions](#) page on I-9 Central for more information.
Form I-9 Edition 08/01/23 Page 2 of 4



Supplement A, Preparer and/or Translator Certification for Section 1

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

USCIS
Form I-9
Supplement A
OMB No. 1615-0047
Expires 07/31/2026

Last Name (Family Name) from Section 1.	First Name (Given Name) from Section 1.	Middle Initial (if any) from Section 1.
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Instructions: This supplement must be completed by any preparer and/or translator who assists an employee in completing Section 1 of Form I-9. The preparer and/or translator must enter the employee's name in the spaces provided above. Each preparer or translator must complete, sign, and date a separate certification area. Employers must retain completed supplement sheets with the employee's completed Form I-9.

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		Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	
		State ZIP Code	

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		Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	
		State ZIP Code	

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		Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	
		State ZIP Code	

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		Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	
		State ZIP Code	

Form I-9 Edition 08/01/23 Page 3 of 4



Supplement B, Reverification and Rehire (formerly Section 3)

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

USCIS
Form I-9
Supplement B
OMB No. 1615-0047
Expires 07/31/2026

Last Name (Family Name) from Section 1.	First Name (Given Name) from Section 1.	Middle Initial (if any) from Section 1.
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Instructions: This supplement replaces Section 3 on the previous version of Form I-9. Only use this page if your employee requires reverification, is rehired within three years of the date the original Form I-9 was completed, or provides proof of a legal name change. Enter the employee's name in the fields above. Use a new section for each reverification or rehire. Review the Form I-9 Instructions before completing this page. Keep this page as part of the employee's Form I-9 record. Additional guidance can be found in the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#).

Date (mm/dd/yyyy)	Last Name (Family Name)	First Name (Given Name)	Middle Initial
Reverification: If the employee requires reverification, your employee can choose to present any acceptable List A or List C documentation to show continued employment authorization. Enter the document information in the spaces below.			
Document Title	Document Number (if any)	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 documentation, the documentation I examined appears to be genuine and to relate to the individual who presented it.			
Name of Employer or Authorized Representative	Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	
Additional Information (initial and date each notation.)			
<p>Check here if you used an alternative procedure authorized by DHS to examine documents.</p>			

Date (mm/dd/yyyy)	Last Name (Family Name)	First Name (Given Name)	Middle Initial
Reverification: If the employee requires reverification, your employee can choose to present any acceptable List A or List C documentation to show continued employment authorization. Enter the document information in the spaces below.			
Document Title	Document Number (if any)	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 documentation, the documentation I examined appears to be genuine and to relate to the individual who presented it.			
Name of Employer or Authorized Representative	Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	
Additional Information (initial and date each notation.)			
<p>Check here if you used an alternative procedure authorized by DHS to examine documents.</p>			

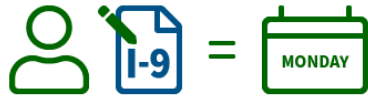
Date (mm/dd/yyyy)	Last Name (Family Name)	First Name (Given Name)	Middle Initial
Reverification: If the employee requires reverification, your employee can choose to present any acceptable List A or List C documentation to show continued employment authorization. Enter the document information in the spaces below.			
Document Title	Document Number (if any)	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 documentation, the documentation I examined appears to be genuine and to relate to the individual who presented it.			
Name of Employer or Authorized Representative	Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	
Additional Information (initial and date each notation.)			
<p>Check here if you used an alternative procedure authorized by DHS to examine documents.</p>			

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Completing Form I-9



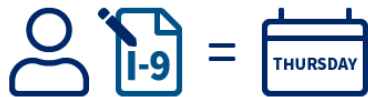
Employee **accepts offer** for employment



Employee **completes Section 1** of the form no later than first day of work for pay



Employee **gives documents and form** to employer



Employer **completes Section 2** of the form no later than 3rd business day employee starts work for pay



If Employee's work authorization expires, **complete Supplement B**

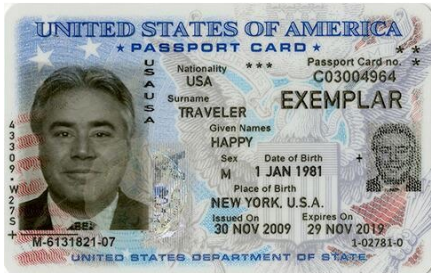
Form I-9 – Employment Eligibility Verification

Section 1: Employee Information and Attestation

Section 2: Employer or Authorized Representative Review and Verification

Employment Eligibility Verification		USCIS Form I-9	
Department of Homeland Security		OMB No. 1615-0047	
U.S. Citizenship and Immigration Services		Expires 07/31/2026	
<p>START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the instructions.</p> <p>ANTI-DISCRIMINATION NOTICE: All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in Section 1, or specify which acceptable documentation employees must present for Section 2 or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.</p> <p>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.</p>			
Last Name (Family Name)		First Name (Given Name)	Middle Initial (if any)
Other Last Names Used (if any)			
Address (Street Number and Name)		Apt. Number (if any)	City or Town
		State	ZIP Code
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number	Employee's Email Address	Employee's Telephone Number
<p>I am aware that federal law provides for imprisonment and/or fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or immigration status, is true and correct.</p> <p>Check one of the following boxes to attest to your citizenship or immigration status (See page 2 and 3 of the instructions):</p> <p><input type="checkbox"/> 1. A citizen of the United States</p> <p><input type="checkbox"/> 2. A noncitizen national of the United States (See Instructions.)</p> <p><input type="checkbox"/> 3. A lawful permanent resident (Enter USCIS or A-Number.)</p> <p><input type="checkbox"/> 4. A noncitizen (other than Item Numbers 2. and 3. above) authorized to work until (exp. date, if any)</p> <p>If you check Item Number 4., enter one of these:</p> <p>USCIS A-Number _____ OR Form I-94 Admission Number _____ OR Foreign Passport Number and Country of Issuance _____</p>			
Signature of Employee		Today's Date (mm/dd/yyyy)	
<p>If a preparer and/or translator assisted you in completing Section 1, that person MUST complete the Preparer and/or Translator Certification on Page 3.</p>			
<p>Section 2. Employer Review and Verification: Employers or their authorized representative must complete and sign Section 2 within three business days after the employee's first day of employment, and must physically examine, or examine consistent with an alternative procedure authorized by the Secretary of DHS, documentation from List A OR a combination of documentation from List B and List C. Enter any additional documentation in the Additional Information box; see Instructions.</p>			
Document Title 1	List A	OR	List B AND List C
Issuing Authority			
Document Number (if any)			
Expiration Date (if any)			
Document Title 2 (if any)	Additional Information		
Issuing Authority			
Document Number (if any)			
Expiration Date (if any)			
Document Title 3 (if any)			
Issuing Authority			
Document Number (if any)			
Expiration Date (if any)			
<p><input type="checkbox"/> Check here if you used an alternative procedure authorized by DHS to examine documents.</p>			
<p>Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee, (2) the above-listed documentation appears 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.</p>			First Day of Employment (mm/dd/yyyy):
Last Name, First Name and Title of Employer or Authorized Representative		Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)
Employer's Business or Organization Name		Employer's Business or Organization Address, City or Town, State, ZIP Code	

Form I-9 Lists of Acceptable Documents



LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.
 * Documents extended by the issuing authority are considered unexpired.
 Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

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

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Authorization
<ol style="list-style-type: none"> U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa Employment Authorization Document that contains a photograph (Form I-766) For an individual temporarily authorized to work for a specific employer because of his or her status or parole: <ol style="list-style-type: none"> Foreign passport; and Form I-94 or Form I-94A that has the following: <ol style="list-style-type: none"> The same name as the passport; and An endorsement of the individual's status or parole 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. 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 		<ol style="list-style-type: none"> 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 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 School ID card with a photograph Voter's 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 For persons under age 18 who are unable to present a document listed above: <ol style="list-style-type: none"> School record or report card Clinic, doctor, or hospital record Day-care or nursery school record 		<ol style="list-style-type: none"> A Social Security Account Number card, unless the card includes one of the following restrictions: <ol style="list-style-type: none"> NOT VALID FOR EMPLOYMENT VALID FOR WORK ONLY WITH INS AUTHORIZATION VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240) Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal Native American tribal document U.S. Citizen ID Card (Form I-197) Identification Card for Use of Resident Citizen in the United States (Form I-179) Employment authorization document issued by the Department of Homeland Security For examples, see Section 7 and Section 13 of the M-274 on uscis.gov/i-9-central. The Form I-766, Employment Authorization Document, is a List A, Item Number 4, document, not a List C document.
Acceptable Receipts				
May be presented in lieu of a document listed above for a temporary period. For receipt validity dates, see the M-274.				
<ul style="list-style-type: none"> Receipt for a replacement of a lost, stolen, or damaged List A document. Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual. Form I-94 with "RE" notation or refugee stamp issued to a refugee. 	OR	<ul style="list-style-type: none"> Receipt for a replacement of a lost, stolen, or damaged List B document. 	AND	<ul style="list-style-type: none"> Receipt for a replacement of a lost, stolen, or damaged List C document.

*Refer to the Employment Authorization Extensions page on [I-9 Central](#) for more information.

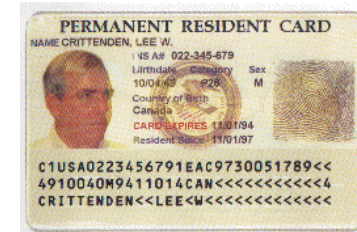
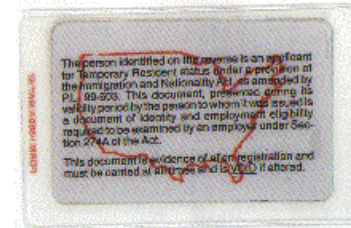


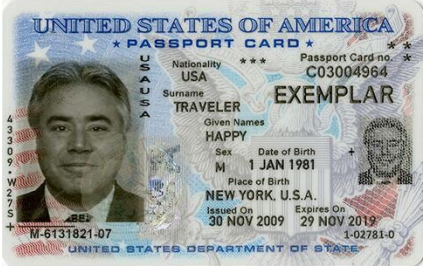
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Acceptable List A Documents

Documents that Establish Both Identity and Employment Authorization

- The documents in List A show both identity and employment authorization.
- Employees presenting an acceptable List A document should not be asked to present any other document.
- Some List A documents are in fact a combination of 2 or more documents. In these cases, the documents presented together count as one List A document.



Acceptable List A Documents That Establish Both Identify and Employment Authorization



U.S. Passport or U.S. Passport Card

Form I-551, Permanent Resident Card or Alien Registration Receipt Card

Foreign Passport containing a Form I-551 stamp or Form I-551 printed notation on a machine-readable immigration visa (MRIV)

Form I-766, Employment Authorization Document Card

Foreign Passport with Form I-94 or Form I-94A with Arrival-Departure Record, and containing an endorsement to work

Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A

Examples of Some List A Acceptable Documents



Arrival Record upon endorsement, serves as temporary I-551 evidencing permanent residency for one year.

Admission Number: 881992193-33

Valid Until: 18 JULY 24

Family Name: DOE

First (Given) Name: JOHN

Country of Citizenship: LUXEMBOURG

Sex: MALE

Birth Date: 01-JAN-1991

Passport Issue Date: 19 JULY 23

Passport Expiration Date: 18 JULY 24

Address While in the United States: 1234 WHARF AVE, LEXINGTON, KY 01010



Get I-94 Number

Admission (I-94) Number Retrieval

Admission (I-94) Record Number: 69000888062

Admit Until Date (MM/DD/YYYY): 10/10/2012

Details provided on Admission(I-94) form:

Family Name: LI
 First (Given) Name: LYDIA
 Birth Date (MM/DD/YYYY): 01/01/1990
 Passport Number: P123123213
 Passport Country of Issuance: Mexico
 Date of Entry (MM/DD/YYYY): 04/11/2012
 Class of Admission: B1

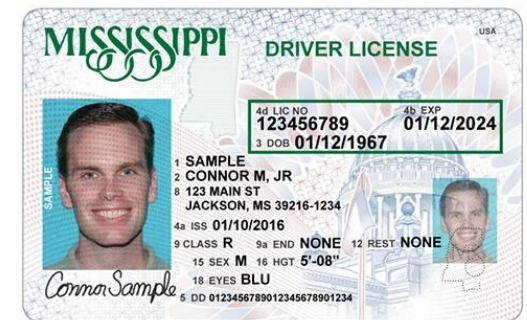


<https://www.uscis.gov/i-9-central/form-i-9-acceptable-documents>

Acceptable List B Document – Documents that Establish Identity

Employees who choose to present a List B document **must also present** a document from List C for Section 2. Employees may present one of the following common unexpired List B documents:

- Driver's license or identification card issued by a state or outlying territory of the U.S., provided it contains a photograph or information such as name, date of birth, gender, height, eye color and address.
- 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.



Acceptable List B Documents (continued)

School ID card with a photograph

Voter registration card

U.S. military card or draft record

Military dependent's ID card

[U.S. Coast Guard Merchant Mariner Document \(MMD\) card](#)

Native American tribal document

Driver's license issued by a Canadian government authority

Acceptable List B Documents (continued)

- For individuals under the age of 18 who are unable to present a document listed on previous slide, the following are acceptable:
 - School record or report card
 - Clinic, doctor or hospital record
 - Day care or nursery school record
- For minors under the age of 18 and certain individuals with disabilities who are unable to produce any of the listed identity documents, special notations may be used in place of a List B document

Acceptable List C Documents – Establish Employment Authorization

Employees who choose to present a List C document must also provide a document from List B, evidence of identity, for Section 2.

Employees may present one of the following unexpired List C documents:

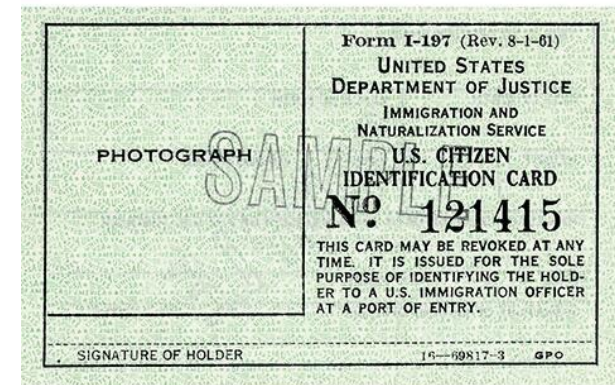
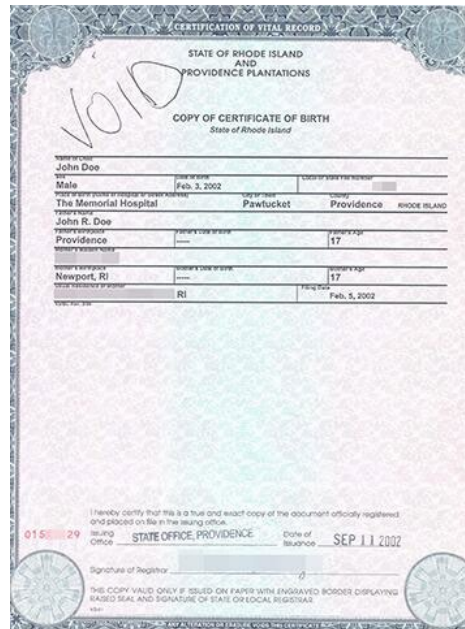
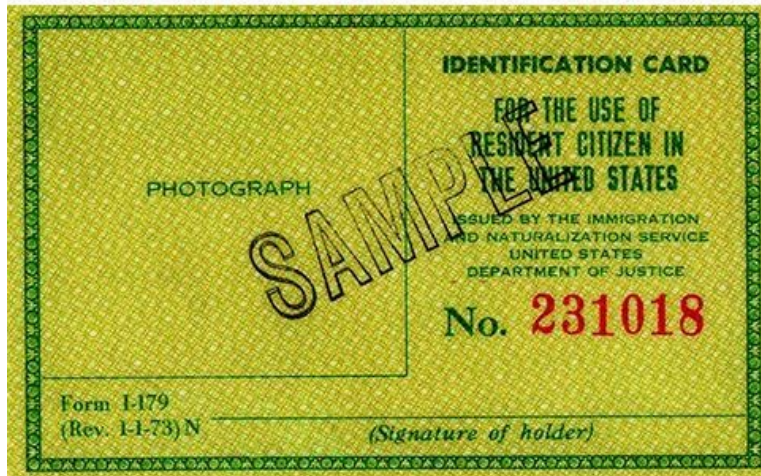
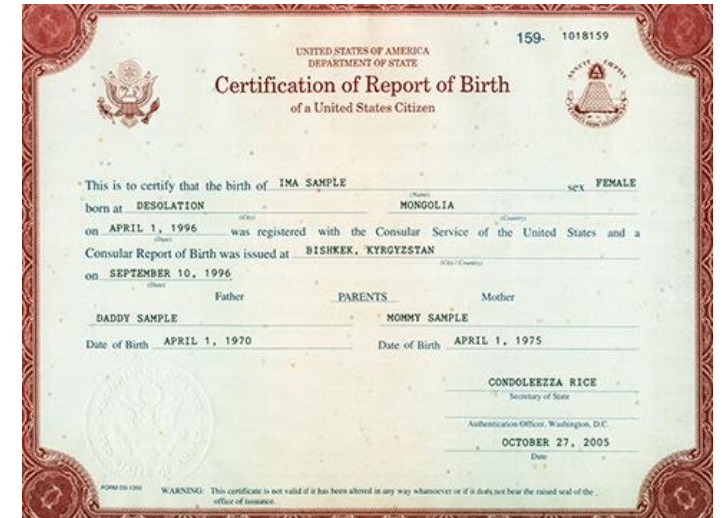
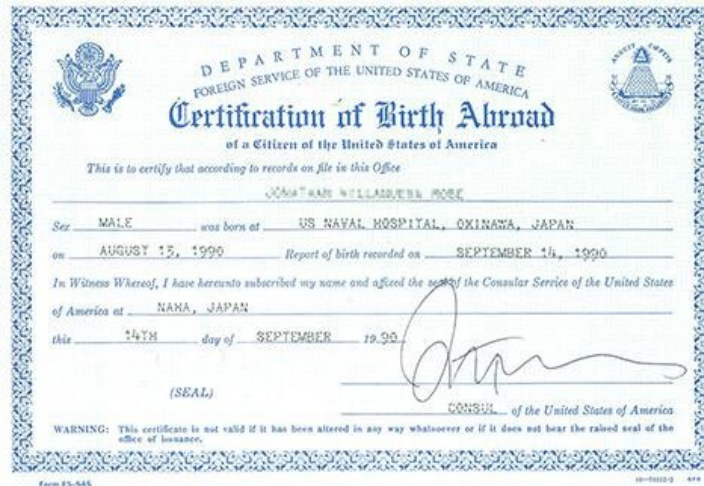
- U.S. Social Security account number card
- U.S. Social Security account number card that is unrestricted. A laminated card is acceptable. A card that includes any of the following restrictive wording is not an acceptable List C document:
 - Not valid for employment
 - Valid for work only with INS authorization
 - Valid for work only with DHS authorization



Acceptable List C Documents (continued)

- Form FS-240, Consular Report of Birth Aboard
- Form FS-545, Certification of Birth Abroad issued by U.S. Department of State
- Form DS-1350, Certification of Report of Birth issued by the U.S. Department of State
- Original or certified copy of birth certificate issued by a state, county municipal authority or outlying territory of the United States bearing an official seal
- Native American tribal document
- Form I-197, U.S. Citizen ID card
- Form I-179, Identification Card for Use of Resident Citizen in the United States

Examples of Some List C Acceptable Documents



<https://www.uscis.gov/i-9-central/form-i-9-acceptable-documents>

Acceptable List C Documents (continued)

Employment authorization document issued by the Department of Homeland Security (DHS)

Some employment authorization documents issued by DHS include but are not limited to:

- [Form I-94 Arrival/Departure Record](#) issued to asylees or work-authorized nonimmigrants (for example, H-1B nonimmigrants) because of their immigration status,
- [Form I-571, Refugee Travel Document \(PDF\)](#),
- An unexpired Form I-327, Reentry Permit,
- Form N-560, [Certificate of U.S. Citizenship](#) or Form N-561, [Replacement Certificate of Citizenship \(PDF, 40.3 KB\)](#), or
- Form N-550, [Certificate of Naturalization](#) or Form N-570, [Replacement Certificate of Naturalization \(PDF, 176.3 KB\)](#).
- A Form I-797 issued to a conditional resident may be an acceptable List C document in combination with an expired Form I-551.

Section 1. Employee Information and Attestation

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) Ride		First Name (Given Name) Sally		Middle Initial (if any) K	Other Last Names Used (if any)
Address (Street Number and Name) 7555 Draper Ave.		Apt. Number (if any)	City or Town La Jolla	State CA	ZIP Code 92037
Date of Birth (mm/dd/yyyy) 05/26/1951	U.S. Social Security Number 1 2 3 4 5 6 7 8 9		Employee's Email Address sallyride@email.com	Employee's Telephone Number (555) 555-5555	
I am aware that federal law provides for imprisonment and/or fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or immigration status, is true and correct.	Check one of the following boxes to attest to your citizenship or immigration status (See page 2 and 3 of the instructions.):				
	<input checked="" type="checkbox"/> 1. A citizen of the United States				
	<input type="checkbox"/> 2. A noncitizen national of the United States (See instructions.)				
<input type="checkbox"/> 3. A lawful permanent resident (Enter USCIS or A-Number.)					
<input type="checkbox"/> 4. A noncitizen (other than Item Numbers 2. and 3. above) authorized to work until (exp. date, if any)					
If you check Item Number 4., enter one of these:					
USCIS A-Number		OR	Form I-94 Admission Number	OR	Foreign Passport Number and Country of Issuance
Signature of Employee <i>Sally Ride</i>			Today's Date (mm/dd/yyyy) Date Employee Completes Section 1		
If a preparer and/or translator assisted you in completing Section 1, that person MUST complete the Preparer and/or Translator Certification on Page 3.					



Employee: Fill in personal information



Other Names used: Revised to allow names other than maiden name



U.S. Social Security Number: Optional unless Employer is an E-Verify Employer



E-mail Address and Telephone: Optional data fields

Form I-9 - Preparer and/or Translator Certification for Section 1 – Supplement A

Completed by individuals who assist employees in completing or translating Section 1



Supplement A,
Preparer and/or Translator Certification for Section 1
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
Supplement A
OMB No. 1615-0047
Expires 07/31/2026

Last Name (<i>Family Name</i>) from Section 1.	First Name (<i>Given Name</i>) from Section 1.	Middle Initial (<i>if any</i>) from Section 1.
--	--	--

Instructions: This supplement must be completed by any preparer and/or translator who assists an employee in completing Section 1 of Form I-9. The preparer and/or translator must enter the employee's name in the spaces provided above. Each preparer or translator must complete, sign, and date a separate certification area. Employers must retain completed supplement sheets with the employee's completed Form I-9.

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		Date (<i>mm/dd/yyyy</i>)	
Last Name (<i>Family Name</i>)	First Name (<i>Given Name</i>)	Middle Initial (<i>if any</i>)	
Address (<i>Street Number and Name</i>)	City or Town	State	ZIP Code

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		Date (<i>mm/dd/yyyy</i>)	
Last Name (<i>Family Name</i>)	First Name (<i>Given Name</i>)	Middle Initial (<i>if any</i>)	
Address (<i>Street Number and Name</i>)	City or Town	State	ZIP Code

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.

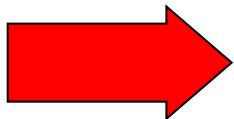
Signature of Preparer or Translator		Date (<i>mm/dd/yyyy</i>)	
Last Name (<i>Family Name</i>)	First Name (<i>Given Name</i>)	Middle Initial (<i>if any</i>)	
Address (<i>Street Number and Name</i>)	City or Town	State	ZIP Code

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		Date (<i>mm/dd/yyyy</i>)	
Last Name (<i>Family Name</i>)	First Name (<i>Given Name</i>)	Middle Initial (<i>if any</i>)	
Address (<i>Street Number and Name</i>)	City or Town	State	ZIP Code

Supplemental A, Preparer and/or Translator Certification of Section 1


Last Name (Family Name) from Section 1. Ride		First Name (Given Name) from Section 1. Sally		Middle Initial (if any) from Section 1. K	
<p>Instructions: This supplement must be completed by any preparer and/or translator who assists an employee in completing Section 1 of Form I-9. The preparer and/or translator must enter the employee's name in the spaces provided above. Each preparer or translator must complete, sign, and date a separate certification area. Employers must retain completed supplement sheets with the employee's completed Form I-9.</p> <p>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.</p>					
Signature of Preparer or Translator <i>Albert Einstein</i>				Date (mm/dd/yyyy) Date Employee Completes Section 1	
Last Name (Family Name) Einstein		First Name (Given Name) Albert		Middle Initial (if any)	
Address (Street Number and Name) 112 Mercer St.		City or Town Princeton		State NJ	ZIP Code 08540



Preparer/Translator ONLY: Read, fill in information, date, and sign (if form is prepared by a person other than the employee).

Form I-9 - Reverification and Rehires – Supplement B

Completed by employers for employees who are rehired or whose employment authorization requires reverification


Supplement B,
Reverification and Rehire (formerly Section 3)
 Department of Homeland Security
 U.S. Citizenship and Immigration Services

USCIS
 Form I-9
Supplement B
 OMB No. 1615-0047
 Expires 07/31/2026

Last Name (Family Name) from Section 1.	First Name (Given Name) from Section 1.	Middle initial (if any) from Section 1.
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Instructions: This supplement replaces Section 3 on the previous version of Form I-9. Only use this page if your employee requires reverification, is rehired within three years of the date the original Form I-9 was completed, or provides proof of a legal name change. Enter the employee's name in the fields above. Use a new section for each reverification or rehire. Review the Form I-9 instructions before completing this page. Keep this page as part of the employee's Form I-9 record. Additional guidance can be found in the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#)

Date of Rehire (if applicable)	New Name (if applicable)		
Date (mm/dd/yyyy)	Last Name (Family Name)	First Name (Given Name)	Middle Initial
Reverification: If the employee requires reverification, your employee can choose to present any acceptable List A or List C documentation to show continued employment authorization. Enter the document information in the spaces below.			
Document Title	Document Number (if any)	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 documentation, the documentation I examined appears to be genuine and to relate to the individual who presented it.			
Name of Employer or Authorized Representative	Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	
Additional Information (initial and date each notation.)			<input type="checkbox"/> Check here if you used an alternative procedure authorized by DHS to examine documents.

Date of Rehire (if applicable)	New Name (if applicable)		
Date (mm/dd/yyyy)	Last Name (Family Name)	First Name (Given Name)	Middle Initial
Reverification: If the employee requires reverification, your employee can choose to present any acceptable List A or List C documentation to show continued employment authorization. Enter the document information in the spaces below.			
Document Title	Document Number (if any)	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 documentation, the documentation I examined appears to be genuine and to relate to the individual who presented it.			
Name of Employer or Authorized Representative	Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	
Additional Information (initial and date each notation.)			<input type="checkbox"/> Check here if you used an alternative procedure authorized by DHS to examine documents.

Date of Rehire (if applicable)	New Name (if applicable)		
Date (mm/dd/yyyy)	Last Name (Family Name)	First Name (Given Name)	Middle Initial
Reverification: If the employee requires reverification, your employee can choose to present any acceptable List A or List C documentation to show continued employment authorization. Enter the document information in the spaces below.			
Document Title	Document Number (if any)	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 documentation, the documentation I examined appears to be genuine and to relate to the individual who presented it.			
Name of Employer or Authorized Representative	Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	
Additional Information (initial and date each notation.)			<input type="checkbox"/> Check here if you used an alternative procedure authorized by DHS to examine documents.

Supplement B, Reverification and Rehires

Last Name (Family Name) from Section 1. Pei		First Name (Given Name) from Section 1. leoh	Middle Initial (if any) from Section 1. M
---	--	--	---

Instructions: This supplement replaces Section 3 on the previous version of Form I-9. Only use this page if your employee requires reverification, is rehired within three years of the date the original Form I-9 was completed, or provides proof of a legal name change. Enter the employee's name in the fields above. Use a new section for each reverification or rehire. Review the Form I-9 instructions before completing this page. Keep this page as part of the employee's Form I-9 record. Additional guidance can be found in the [Handbook for Employers: Guidance for Completing Form I-9 \(M-274\)](#)

Date of Rehire (if applicable) Date (mm/dd/yyyy) Enter Rehire Date the Employee Begins Employment	New Name (if applicable) Last Name (Family Name) Pei		First Name (Given Name) I.M.	Middle Initial
--	---	--	--	----------------

Reverification: If the employee requires reverification, your employee can choose to present any acceptable List A or List C documentation to show continued employment authorization. Enter the document information in the spaces below.

Document Title EAD	Document Number (if any) 123456789	Expiration Date (if any) (mm/dd/yyyy) Enter Date New EAD Expires
------------------------------	--	--

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 documentation, the documentation I examined appears to be genuine and to relate to the individual who presented it.

Name of Employer or Authorized Representative Smithsonian Institution	Signature of Employer or Authorized Representative <i>John David</i>	Today's Date (mm/dd/yyyy) Enter Date Employer Signs Supplement B
---	---	--

Additional Information (Initial and date each notation.)

Check here if you used an alternative procedure authorized by DHS to examine documents.

Supplement B: When is It Required

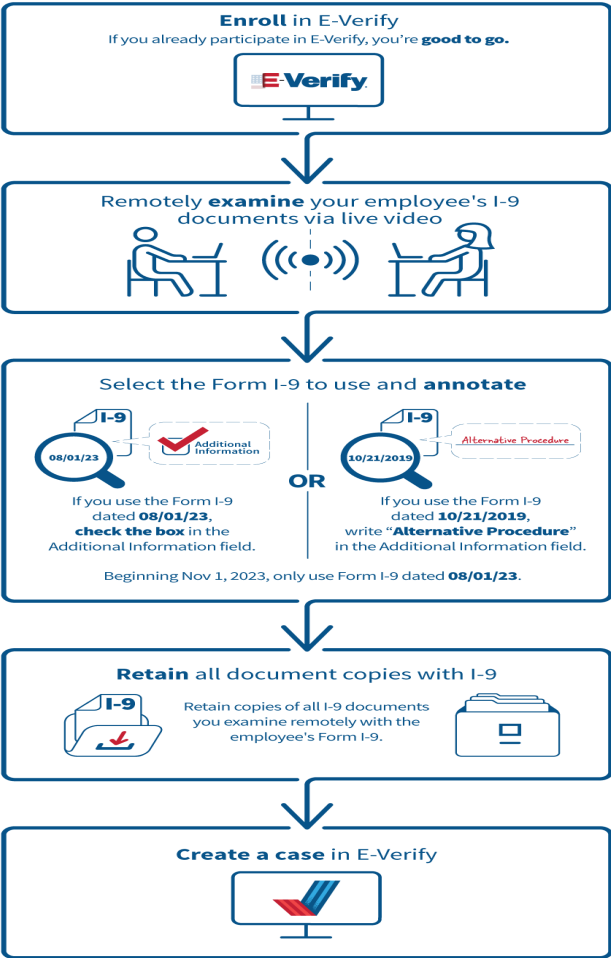




I-9 Remote Inspection Rule

The Remote Inspection Rule: Step by Step

How do I participate in the remote examination of Form I-9 documents?



<https://www.uscis.gov/i-9-central/form-i-9-related-news/new-form-i-9-notice-published-allowing-e-verify-employers-to-remotely-examine-form-i-9-documents>

Alternative Procedure to Physical Document Examination

Must be an E-Verify user in good standing

Alternative procedures do not have to be used at all sites noted on E-Verify

Alternative procedures must be used consistently at site when designated for use

Provide for remote inspection of documents

Remote Inspection Procedures



Examine copies (front and back) of documents from List of Acceptable Documents presented electronically from new hire



Conduct live video interaction with new hire to confirm documents presented electronically reasonably appears to be **genuine** and **relates** to the new hire



Make a clear and legible copy of the documentation



Indicate in Section 2 that “Alternative Procedure...” was used

Document Use of Alternative Procedures

- Form I-9 dated 08/01/2023

Additional Information
<p><input checked="" type="checkbox"/> Check here if you used an alternative procedure authorized by DHS to examine documents.</p>

Document Use of Alternative Procedures (continued)

- Form I-9 dated 10/21/2019 - notate “Alternative Procedure” in the additional information field in Section 2
- Reverification or Rehire: Check box on Form I-9 Edition 08/01/2023, in Supplement B
- Retention of documents with Form I-9 during the retention period
- I-9 Audit - must make available copies of identity and U.S. work authorization document the new hire presented for remote document examination



I-9 Policy and Procedures

I-9 Policy and Procedures



Establish a written I-9 policy



Integrate I-9 policy with overall personnel policy, materials and applications



Designate overall I-9 compliance administrator



I-9 compliance administrator should be charged with centralized oversight, management, and training regarding the I-9 compliance program

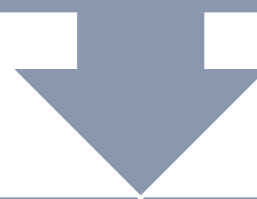
I-9 Policy and Procedures (continued)

Provide guidance on I-9 procedures and clarification to all company employees who have hiring authority or are part of the hiring process regarding:

a. When verification and reverification must be completed;

b. What questions may be lawfully asked prior to the actual offer of employment; and

c. To whom employees should be referred for guidance and assistance on I-9 verification procedures



Provide guidance on I-9 verification for employees charged with the implementation of I-9 procedures



Provide clear instructions for internal I-9 audits

I-9 Policy and Procedures (continued)



Conduct annual I-9 audits or, at minimum, an initial audit of all existing I-9 Forms



An audit of the company's I-9 Forms will allow the company to determine errors and violations and:

1. Self-correct I-9 Forms before a government audit; and
2. Determine the areas of training needed for company personnel

A yellow decorative shape, resembling a stylized arrow or a wedge, pointing to the right, located in the upper left corner of the slide.

I-9 Maintenance

I-9 Maintenance



Employers must maintain I-9 Forms for at least 3 years from date of hire or 1 year after end of employment, whichever is later



Maintain I-9 Forms separate from personnel files



Separate I-9 Forms of current employees from terminated employees

I-9 Maintenance (continued)



Attach supporting documents to I-9 Form if company has policy of making copies



I-9 Forms can be stored at headquarters, individual offices, or electronically

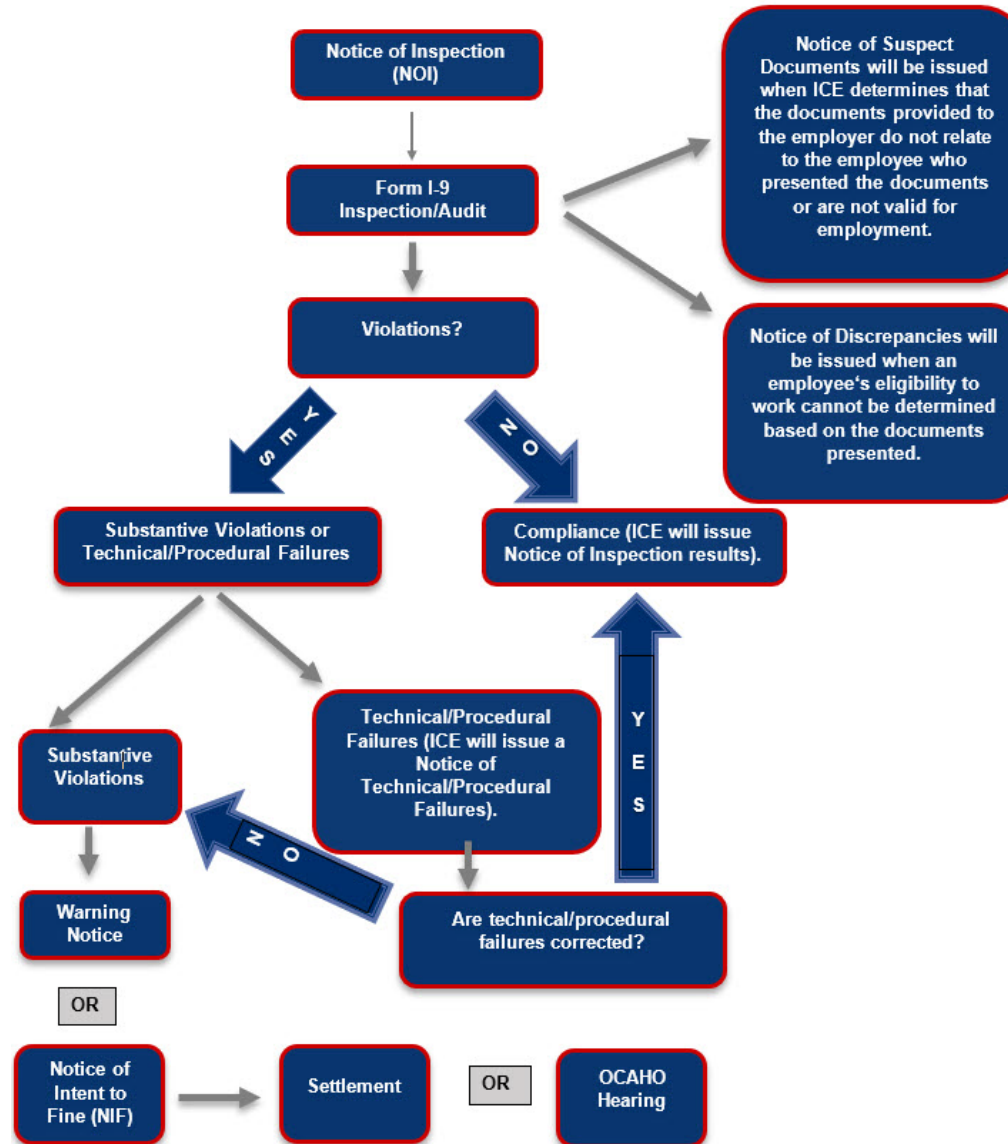


Store I-9 Forms to allow them to be made available within three business days in an I-9 audit

A yellow decorative shape consisting of a horizontal bar on the left that tapers to a point on the right, positioned in the upper left corner of the dark blue background.

I-9 Audits

Lifecycle of I-9 Audit / Investigation



<https://www.ice.gov/factsheets/i9-inspection>

Preparing for Government I-9 Audits

- Have legal counsel conduct internal I-9 audit
- Prepare new I-9s for employees with missing/no I-9s on file
- Correct all errors where possible
 - Use a different color pen
 - Strike out errors with a single line; Do NOT use white-out
 - Correct, initial, and note “per audit on _____”

Preparing for Government I-9 Audits (continued)

- Never backdate I-9 corrections
- Employer can never correct Section 1
- Establish an I-9 audit response plan
- Consider making copies of supporting documents as they can be used for corrections and avoiding fines during an audit



I-9 Compliance and E-Verify

Looking Ahead at I-9 Compliance



Questions



Presenters



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Matthew Webster

Senior Immigration Attorney

612.492.7234

Mwebster@fredlaw.com

Thank you!

Fredrikson

Where Law and Business Meet[®]