

I-9 Training

When do you need an I-9

- ▶ New employees
- ▶ Lapse in service
 - ▶ Three years after the date of hire *or* one year after termination - whichever is later
- ▶ A previously I-9-exempt employee that terminates and then comes back (even if the lapse in only one day)
- ▶ Citizenship status change

PWIVERI (1)

Employee History Form PWIVERI 8.10 UO.1 (PROD)

ID:

Employee Class: XB Grad Assist and Fellows
 Home ORG: 222585 CAS Sociology Operations
 Check/Earn ORG: 431142 BAC Counter Pickup Indicator
 Employee Status: A Active
 Current Hire: 21-JUN-2010
 Original Hire: 26-SEP-2005

I-9 Form Ind: R Received
 I-9 Date: 25-SEP-2006
 I-9 Expiration:

Direct Deposit: AP: None
 HR: Inactive

Job Information	Begin Date	End Date	Posn	Suff	Type	Exmpt	EEO	Position Class
	16-SEP-2010	15-JUN-2018	BUOG9T	00	P	Y	80	XB001 Grad Asst1/Teaching Regular
	01-JUL-2017	31-AUG-2017	BUOG0V	00	O	Y	80	XB051 Grad Asst1/Teaching Summer
	16-JUL-2017	15-AUG-2017	BUOGSS	00	S	Y	80	XB051 Grad Asst1/Teaching Summer
	01-SEP-2010	31-MAY-2017	BUOGRM	00	S	Y	80	XB001 Grad Asst1/Teaching Regular

PWIVERI (2 - I-9 expiration date)

Employee History Form PWIVERI 8.10 UO.1 (PROD)

ID:

Employee Class: XB Grad Assist and Fellows
 Home ORG: 222560 CAS Int'l Studies Operations
 Check/Earn ORG: 222560 CAS Int'l Studies Operations
 Employee Status: A Active
 Current Hire: 16-SEP-2017
 Original Hire: 16-SEP-2017

I-9 Form Ind: T Temporary
 I-9 Date: 16-SEP-2017
 I-9 Expiration: 31-JUL-2018

Direct Deposit: AP: A Active
 HR: A Active

- ▶ International documents
- ▶ Social security receipts

Important Rules

- ▶ You must see the original documents being used for the I-9, not copies of the documents
 - ▶ You are signing *under penalty of perjury* that you have seen the originals
- ▶ No expired documents
- ▶ You cannot tell them which documents they have to use
- ▶ The I-9 should be completed within three days of the job start date
 - ▶ Can be completed as soon as employee is available
 - ▶ Employees should not be working unless a valid I-9 is on file
 - ▶ If an employee works without a valid I-9, and no I-9 can be collected, then we will set them as *non-compliant*, terminate their employee status, and pay for all hours worked
- ▶ Always use the most recent version of the I-9 available; old versions are invalid and will not be accepted

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED		
Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.		
LIST A Documents that Establish Both Identity and Employment Authorization	LIST B Documents that Establish Identity	LIST C Documents that Establish Employment Authorization
1. U.S. Passport or U.S. 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 4. Employment Authorization Document that contains a photograph (Form I-766) 5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport, and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport, and (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form. 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	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 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 3. School ID card with a photograph 4. Voter's registration card 5. U.S. Military card or draft record 6. Military dependent's ID card 7. U.S. Coast Guard Merchant Mariner Card 8. Native American tribal document 9. Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document listed above: 10. School record or report card 11. Clinic, doctor, or hospital record 12. Day-care or nursery school record	1. A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION 2. Certification of report of birth issued by the Department of State (Forms DS-1250, FS-545, FS-240) 3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal 4. Native American tribal document 5. U.S. Citizen ID Card (Form I-197) 6. Identification Card for Use of Resident Citizen in the United States (Form I-179) 7. Employment authorization document issued by the Department of Homeland Security

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

Refer to the instructions for more information about acceptable receipts.

Clear Form



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

USCIS
Form I-9
 OMB No. 1815-0047
 Expires 08/31/2019

▶ 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.)*

Last Name (Family Name) Doerksen		First Name (Given Name) Austin	Middle Initial D	Other Last Names Used (if any)	
Address (Street Number and Name) 720 East 13th Avenue		Apt. Number 2	City or Town Eugene	State OR	ZIP Code 97403
Date of Birth (mm/dd/yyyy) 08/29/1975	U.S. Social Security Number 123-45-6789	Employee's E-mail Address austin@uoregon.edu		Employee's Telephone Number 541.346.3159	

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

<input type="checkbox"/> 1. A citizen of the United States	
<input type="checkbox"/> 2. A noncitizen national of the United States (See instructions)	
<input type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number):	111-11-1111
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy):	06/15/2018

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:	
OR	
2. Form I-94 Admission Number:	121212121212
OR	
3. Foreign Passport Number:	D121212121212
Country of Issuance:	Turkey

QR Code - Section 1
Do Not Write in This Space

Signature of Employee	Today's Date (mm/dd/yyyy)
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Preparer and/or Translator Certification (check 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 preparers and/or translators assist an employee in completing Section 1.)

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator	Today's Date (mm/dd/yyyy)
-------------------------------------	---------------------------

Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State ZIP Code

I attest, under penalty of perjury, that I am (check one of the following boxes):

1. A citizen of the United States

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

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

4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____
Some aliens may write "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: _____
OR
2. Form I-94 Admission Number: _____
OR
3. Foreign Passport Number: _____
Country of Issuance: _____

QR Code - Section 1
Do Not Write In This Space

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

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

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

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) Doerksen	First Name (Given Name) Austin	M.I. D	Citizenship/Immigration Status 1
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List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title Passport		Document Title		Document Title
Issuing Authority USA		Issuing Authority		Issuing Authority
Document Number D12121212		Document Number		Document Number
Expiration Date (if any)(mm/dd/yyyy) 08/29/2025		Expiration Date (if any)(mm/dd/yyyy)		Expiration Date (if any)(mm/dd/yyyy)
Document Title		Additional Information		QR Code - Sections 2 & 3 Do Not Write In This Space
Issuing Authority				
Document Number				
Expiration Date (if any)(mm/dd/yyyy)				
Document Title				
Issuing Authority				
Document Number				
Expiration Date (if any)(mm/dd/yyyy)				

		Employment Eligibility Verification Department of Homeland Security U.S. Citizenship and Immigration Services		USCIS Form I-9 OMB No. 1615-0047 Expires 08/31/2019	
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Employee Info from Section 1		Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
		Doerksen	Austin	D	2
List A Identity and Employment Authorization		List B Identity		List C Employment Authorization	
Document Title		Document Title		Document Title	
		Driver License		Social Security Card	
Issuing Authority		Issuing Authority		Issuing Authority	
		Oregon DMV		Social Security Admin	
Document Number		Document Number		Document Number	
		1234567		123-45-6789	
Expiration Date (if any)(mm/dd/yyyy)		Expiration Date (if any)(mm/dd/yyyy)		Expiration Date (if any)(mm/dd/yyyy)	
		08/29/2025			
Document Title		Additional Information		G-1 Code - Sections 2 & 3 Do Not Write in This Space	
Issuing Authority					
Document Number					
Expiration Date (if any)(mm/dd/yyyy)					
Document Title					
Issuing Authority					
Document Number					
Expiration Date (if any)(mm/dd/yyyy)					

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): 03/16/2018 (See instructions for exemptions)

Signature of Employer or Authorized Representative		Today's Date (mm/dd/yyyy)	Title of Employer or Authorized Representative	
			Payroll Specialist	
Last Name of Employer or Authorized Representative		First Name of Employer or Authorized Representative		Employer's Business or Organization Name
Butler		Jay		University of Oregon
Employer's Business or Organization Address (Street Number and Name)			City or Town	State
101 Oregon Hall			Eugene	OR
			ZIP Code	
			97403	

Social Security Receipts and Cards

- ▶ Good for 90 days
 - ▶ Although the Payroll Office will follow up if the card is not received once the grace period is over, departments should be monitoring employees that need to submit a social security card
- ▶ <https://www.ssa.gov/history/ssn/ssnversions.html>



Notes About International Documents

- ▶ F and J visa holders will have a combination of 3 documents to complete List A:
 - ▶ Passport
 - ▶ I-94
 - ▶ I-20 or DS-2019
- ▶ TN, H1-B, and E3 visa holders will have two items:
 - ▶ Passport
 - ▶ I-94
- ▶ A social security card or receipt must be submitted even though it cannot be used for the I-9

		Employment Eligibility Verification Department of Homeland Security U.S. Citizenship and Immigration Services		USCIS Form I-9 OMB No. 1615-0047 Expires 08/31/2019	
Section 2. Employer or Authorized Representative Review and Verification <i>(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.")</i>					
Employee Info from Section 1		Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
		Doerksen	Austin	D	4
List A Identity and Employment Authorization		OR	List B Identity	AND	List C Employment Authorization
Document Title	Passport	Document Title		Document Title	
Issuing Authority	Turkey	Issuing Authority		Issuing Authority	
Document Number	D12121212	Document Number		Document Number	
Expiration Date (if any)(mm/dd/yyyy)	06/20/2025	Expiration Date (if any)(mm/dd/yyyy)		Expiration Date (if any)(mm/dd/yyyy)	
Document Title	I-20	Additional Information		QR Code - Sections 2 & 3 Do Not Write In This Space	
Issuing Authority	US CBP				
Document Number	N10100000111				
Expiration Date (if any)(mm/dd/yyyy)	06/15/2018				
Document Title	I-94				
Issuing Authority	US DHS				
Document Number	12345786987				
Expiration Date (if any)(mm/dd/yyyy)	D/S				

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Employee Info from Section 1		Last Name (Family Name)	First Name (Given Name)	M.I.	Citizenship/Immigration Status
		Doerksen	Austin	D	4
List A Identity and Employment Authorization		OR	List B Identity	AND	List C Employment Authorization
Document Title	Passport	Document Title		Document Title	
Issuing Authority	Turkey	Issuing Authority		Issuing Authority	
Document Number	D12121212	Document Number		Document Number	
Expiration Date (if any)(mm/dd/yyyy)	06/20/2025	Expiration Date (if any)(mm/dd/yyyy)		Expiration Date (if any)(mm/dd/yyyy)	
Document Title	I-94	Additional Information		QR Code - Sections 2 & 3 Do Not Write In This Space	
Issuing Authority	US DHS				
Document Number	123456789777				
Expiration Date (if any)(mm/dd/yyyy)	06/15/2018				
Document Title					
Issuing Authority					
Document Number					
Expiration Date (if any)(mm/dd/yyyy)					

Department of Homeland Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB No. 1653-0038

SEVIS ID: N0004705512

STUDENT/ALIENARY NAME Sohn Doe-Deith	GIVEN NAME Sohn	CLASS F-1
PREFERRED NAME Sohn Doe-Deith	PASSPORT NAME Sohn Doe-Deith	ACADEMIC AND LANGUAGE
COUNTRY OF BIRTH United States	COUNTRY OF CITIZENSHIP United States	
DATE OF BIRTH 01 January 1980	ADMISSION NUMBER 00000000000000000000	
FORM ISSUE REASON (011) Initial Admission	LEGACY NAME Sohn Doe-Deith	

SCHOOL INFORMATION

SCHOOL NAME XYZ School For Advanced SEVIS Studies	SCHOOL ADDRESS 1000 Main Street, Washington, MD 20744
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL John A. Schertzman, FSO	SCHOOL CODE AND APPROVAL DATE 00000000000000000000 01 April 2015

PROGRAM OF STUDY

EDUCATION LEVEL DOCTORATE	MAJOR 1 Economics, General 49.0402	MAJOR 2 None 00.0000
NORMAL PROGRAM LENGTH 24 Months	PROGRAM ENGLISH PROFICIENCY None	ENGLISH PROFICIENCY NOTES Student is proficient
PROGRAM START DATE 01 September 2015	PROGRAM END DATE 31 May 2017	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR 9 MONTHS	STUDENT'S FUNDING FOR 9 MONTHS
Tuition and Fees \$ 23,000	Private Funds \$ 3,000
Living Expenses \$ 4,000	Scholarship and Teaching Assistantship \$ 20,000
Expenses of Dependents (if)	Funds From Another Source \$
Other \$	On-Campus Employment \$
TOTAL \$ 27,000	TOTAL \$ 23,000

REMARKS
Registration begins 8/21/2015. Please report to 1200 upon arrival.

SCHOOL ATTESTATION
I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were reviewed at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(b)(6). I am a designated school official of the above named school and am authorized to issue this form.

DATE ISSUED 21 April 2015 **PLACE ISSUED** Ft. Washington, MD

SIGNATURE OF Student/Alimentary FSO

STUDENT ATTESTATION
I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form pertains specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(a) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

SIGNATURE OF John Doe Smith **DATE**

NAME OF PARENT OR GUARDIAN **SIGNATURE** **ADDRESS (city/state or province/country)** **DATE**

Employment Authorization Documents

- ▶ This is a List A document
- ▶ Permanent Resident Card
 - ▶ Treated the same as a US citizen for payroll paperwork
- ▶ Employment Authorization Card
 - ▶ OPT, CPT, DACA, Asylum
 - ▶ May require additional documents such as a UO-NRA

Submitting the I-9 to Payroll

- ▶ Please be sure that the I-9 is filled out completely and signed by both parties
- ▶ Include copies of the documents being used to fulfill the I-9
- ▶ Submit by the document deadline to ensure the position will be in Banner in time for Time Entry
 - ▶ <https://bg.uoregon.edu/content/hris-deadlines>

MyTrack I-9s and Remote Hires

When the I-9 is not being completed within the department

- ▶ The Payroll Office can complete I-9s for employees being hired through MyTrack
 - ▶ mytrackpayroll@uoregon.edu
- ▶ If an employee will not be in Eugene in time to complete the I-9 within 3 days of start, or is working remotely, you can have an outside party complete the I-9 and send it to you
 - ▶ <https://bg.uoregon.edu/Remote%20Hires>

Useful Websites

- ▶ <https://bg.uoregon.edu/content/i-9-instructions>
- ▶ https://www.uscis.gov/sites/default/files/USCIS/Verification/E-Verify/E-Verify_Native_Documents/E-Verify%20Manuals%20and%20Guides/M-274-Handbook-for-Employers.pdf (pages 58-67 are examples of documents)
- ▶ <https://www.uscis.gov/i-9-central>
- ▶ <https://www.uscis.gov/i-9-central/acceptable-documents/list-documents/form-i-9-acceptable-documents>
- ▶ <https://www.uscis.gov/i-9-central/acceptable-documents/additional-documentation-requirements>

Thank you for coming!!!

- ▶ Any questions? Please feel free to email Keri Bartow at kbartow1@uoregon.edu or gepayroll@uoregon.edu