



Now More Compliance... I-9 Forms



Employee Section 1



Employment Eligibility Verification

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

USCIS

Form I-9

OMB No. 1615-0047

Expires 03/31/2016

▶ **START HERE.** Read instructions carefully before completing this form. The instructions must be available during completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation (Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)

Last Name (Family Name)		First Name (Given Name)		Middle Initial	Other Names Used (if any)	
Address (Street Number and Name)		Apt. Number	City or Town		State	Zip Code
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number	E-mail Address			Telephone Number	

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

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

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

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

1. Alien Registration Number/USCIS Number: _____
- OR
2. Form I-94 Admission Number: _____

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

Foreign Passport Number: _____

Country of Issuance: _____

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

Signature of Employee:	Date (mm/dd/yyyy):
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Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.)

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

Signature of Preparer or Translator:		Date (mm/dd/yyyy):	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State Zip Code



Employer Completes Next Page





Employer Section 2

Reverify Rehire Section 3

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)

Employee Last Name, First Name and Middle Initial from Section 1:

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title:		Document Title:		Document Title:
Issuing Authority:		Issuing Authority:		Issuing Authority:
Document Number:		Document Number:		Document Number:
Expiration Date (if any)(mm/dd/yyyy):		Expiration Date (if any)(mm/dd/yyyy):		Expiration Date (if any)(mm/dd/yyyy):
Document Title:				
Issuing Authority:				
Document Number:				
Expiration Date (if any)(mm/dd/yyyy):				
Document Title:				
Issuing Authority:				
Document Number:				
Expiration Date (if any)(mm/dd/yyyy):				

3-D Barcode
Do Not Write in This Space

Certification

I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): _____ (See instructions for exemptions.)

Signature of Employer or Authorized Representative		Date (mm/dd/yyyy)	Title of Employer or Authorized Representative	
Last Name (Family Name)		First Name (Given Name)	Employer's Business or Organization Name	
Employer's Business or Organization Address (Street Number and Name)		City or Town	State	Zip Code

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

A. New Name (if applicable) Last Name (Family Name)		First Name (Given Name)	Middle Initial	B. Date of Rehire (if applicable) (mm/dd/yyyy):
C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below.				
Document Title:	Document Number:	Expiration Date (if any)(mm/dd/yyyy):		

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative:	Date (mm/dd/yyyy):	Print Name of Employer or Authorized Representative:
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I-9 RESOURCES

- M-274
 - <http://www.uscis.gov/laws/immigration-handbooks-manuals-and-guidance>
- I-9 Central
 - <http://www.uscis.gov/i-9-central>



IS THIS OK?

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 examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)</i>			
Employee Last Name, First Name and Middle Initial from Section 1: <u>Smith, John J</u>			
List A Identity and Employment Authorization	OR	List B Identity	AND List C Employment Authorization
Document Title:		Document Title: <u>Driver License</u>	Document Title: <u>I-94</u>
Issuing Authority:		Issuing Authority: <u>Texas DPS</u>	Issuing Authority: <u>CBP</u>
Document Number:		Document Number: <u>123456789</u>	Document Number: <u>6900088062</u>
Expiration Date (if any)(mm/dd/yyyy):		Expiration Date (if any)(mm/dd/yyyy): <u>3/16/2016</u>	Expiration Date (if any)(mm/dd/yyyy): <u>3/10/2016</u>
Document Title:		<div>3-D Barcode Do Not Write in This Space</div>	
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): <u>3/10/2015</u> (See instructions for exemptions.)			
Signature of Employer or Authorized Representative: <u>Joe Blow</u>		Date (mm/dd/yyyy): <u>3/13/2015</u>	Title of Employer or Authorized Representative: <u>HR Manager</u>
Last Name (Family Name): <u>Blow</u>		First Name (Given Name): <u>Joe</u>	Employer's Business or Organization Name: <u>Acme Corp.</u>
Employer's Business or Organization Address (Street Number and Name): <u>1234 Anywhere Street</u>		City or Town: <u>Houston</u>	State: <u>TX</u>
			Zip Code: <u>77005</u>



AILA LIAISON WITH USCIS AND ICE HOMELAND SECURITY INVESTIGATIONS, NOVEMBER 6, 2014

- List C Documents (Establishes Work Authorization only)
 - Form I-94 work-authorized nonimmigrant (e.g., H-1B nonimmigrants)
 - The Certificate of U.S. Citizenship (Form N-560 or N-561), or the Certificate of Naturalization (Form N-550 or N-570).
 - A form I-797 issued to a conditional resident may be an acceptable List C(8) document in combination with his or her expired Form I-551 (“green card”).



NEW I-94

I-94 as shown in the M-274
and issued at land borders

Departure Number
813106636 11

Department of
Homeland Security
CBP I-94A (11/04)
Departure Record

L1
12345
09/17/2007

Family Name
SAMPLE
First (Given) Name
AHMET
Country of Citizenship
PAKISTAN
20041122 US-VISIT 20050207 MULTIPLE

See Other Side

STAPLE HERE

Form I-94A Arrival/Departure Record

New I-94 available
from CBP.gov

U.S. Customs and Border Protection
Securing America's Borders

Get I-94 Number **I-94 FAQ**

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

Individuals can visit www.cbp.gov/I94 to retrieve a copy of their electronic Form I-94.



WHO NEEDS AN I-9 FORM?

- If employment lasts only one day?
- Employees hired before November 6, 1986 ?
- Employees hired more than 3 years ago?
- Owners?
- Subcontractors?
- ICE can double check
 - Tax and Wage Report



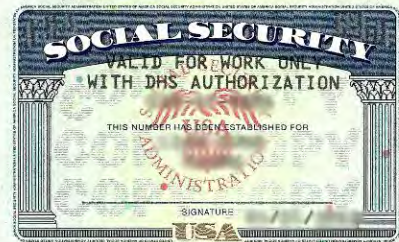
RECEIPT RULE

- A receipt for a replacement document when the document has been lost, stolen, or damaged. The receipt is valid for 90 days. At the end of the receipt validity period, the individual must present the replacement document to complete Form I-9.
- **NOTE:** This rule does not apply to employees who present receipts for new documents following the expiration of their previously held document.



RESTRICTED SSN CARD

- What should I do if an employee presents a Social Security card marked "NOT VALID FOR EMPLOYMENT," but states that he or she is now authorized to work?
- You should ask the employee to provide another document instead of a Restricted SSN Card





L-2 EAD

- USCIS's current position is that the I-94 is not acceptable for Form I-9 for L-2 workers to establish work authorization. L-2 workers must have an EAD.
- Conflict with SSA



ICE FACTS FOR 2013

- ICE made 452 criminal arrests tied to worksite enforcement investigations.
- Of the individuals criminally arrested, 179 were owners, managers, supervisors or human resources employees.
- ICE served 3,127 Notices of Inspection and 637 Final Orders, totaling \$15,808,365.00 in administrative fines.



FINES FOR PAPERWORK VIOLATIONS AND KNOWING HIRE VIOLATIONS

- Paperwork violations
 - \$110-\$1,100 per employee
- If knowingly hired (ex. a missing I-9) an unauthorized alien
 - \$250-\$2,200



HOUSTON BASED FINES – UNAUTHORIZED WORKERS

- Hong Li Employment Agency, \$2.2 million and 18 months in federal prison for placing illegal aliens as food service workers in Chinese and Asian restaurants across the United States, 2/5/2015
- Atrium Companies, Champion Window, \$2 million, admits to hiring illegal aliens, 1/24/2012
- Advanced Containment Systems Inc., \$2 million, admits to hiring illegal aliens, 1/24/2012
- IFCO Systems, \$20.7 million, Five Senior Managers pled guilty to hiring illegal aliens, 9/15/2011



OFFICE OF THE CHIEF ADMINISTRATIVE HEARING OFFICER (OCAHO) DECISIONS

- U.S. v. La Hacienda Mexican Café, 10 OCAHO No. 1167 (2013)
 - 24 missing I-9 forms initially fined at \$935 each
- U.S. v. Pharoah's Gentleman's Club, Inc., 10 OCAHO No. 1189 (2013)
 - 41 missing or improperly completed I-9 forms initially fined at \$935 each
 - Backdating? The version of the form used did not exist at the time the I-9 was supposedly completed and identification documents were issued after the purported preparation date



FINES FOR DISCRIMINATION OR DOCUMENT ABUSE

- Document Abuse
 - requesting more or different documents than are required
- *U.S. v Life Generations Healthcare, LLC d/b/a Generations Healthcare*, 11 OCAHO 1227 (Sept. 11, 2014)
 - As a general rule, statistical disparities over two or three standard deviations have been held to support an inference of discrimination
- Fines include backpay, and
 - \$250 to \$2,000 - discrimination
 - \$100 to \$1,000 – document abuse



IN HOUSE AUDIT

- ICE best practice
 - Remediate non-compliant I-9 Forms with an audit
- OSC states that I-9 audits must be conducted in a non-discriminatory manner
 - Identify any document abuse



E-VERIFY

- E-Verify top Errors
 - Non-Use of E-Verify or fails to verify within 3 days of hire
 - Verifies existing employees
 - Terminates an employee who contests a TNC or fails to print TNC Referral Notice
 - Employee continues to work after FNC
 - Global receipt number, I-94 number, A-number, passport number, SSN use
- *Texas Executive Order, December 3, 2014, all state agencies under the direction of the governor must use E-verify for all persons, including subcontractors*