

2017 CHECKLIST FOR I-9 VERIFIERS

The Checklist should be used in its entirety for every I-9 verified.

Ensure you are using the most current Form I-9, dated 07/17/2017N in lower left corner

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) ?		First Name (Given Name) ?		Middle Initial ?
Other Last 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 ?
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):

<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): ? _____	
<input type="checkbox"/> 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) ?	

Departmental verifier confirms Employee's Information:

- Name fields are complete and legible. Enter N/A if there is no middle name
- If "Other **Last** Names Used" does not apply, ensure N/A is recorded there. If "Other Last Names Used" does apply, then only list the different last name
- Address is a current U.S. address, not a work address
- If there is no Apt. Number, enter N/A.
- Address is complete and legible
- Date of birth is accurate and formatted as mm/dd/yyyy
- Social Security number is accurate
- If Email and Telephone is not entered, place N/A in each box

In employee attestation section

- Employee checked only one box
- If box 3 is checked, the employee recorded the Alien Registration number/USCIS Number
- If box 4 is checked, the employee recorded expiration date for work authorization
- If box 4 is checked, the employee *either* recorded:
 - o The Alien Registration Number/USCIS Number (if document is Employment Authorization Card)

OR

- Form I-94 admission number
- OR**
- Relevant passport information (number & Country of Issuance)
- Employee Signed
- Employee dated using mm/dd/yyyy format
- Employee wrote TODAY'S date, not yesterday's nor tomorrow's

Is a correction needed?

- Have employee draw one line thru incorrect info, initial, date and add correction**

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.)

- Employee must check the first box if no preparer or translator was used.
- If employee used a preparer or translator to assist, **the preparer/translator must check the second box** and complete the information in the section provided.

Section 2. Employer or Authorized Representative Review and Verification

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 ?
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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 ?		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) ?				

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 ?	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 Name ?
Employer's Business or Organization Address (Street Number and Name) ?		City or Town ?
		State ?
		ZIP Code ?

Departmental verifier confirms:

- Employee's last name, first name and middle initial are written at the top of Section 2*
- Citizenship/Immigration Status matches (1-4) the selections from Section 1*
- For List A documents: Use page 9 of Form I-9. For List B/C documents page 9 of Form I-9.
- Confirm all relevant portions of column titled "List A" are appropriately completed
- First day of employment is recorded accurately (mm/dd/yyyy)
- Signed by the verifier
- Today's Date (mm/dd/yyyy)
- Title of employer is your working job title
- Employer's Business or Organization Name is **University of Vermont** – no abbreviations
- Employer's Business Address is **85 South Prospect St, Burlington, VT 05405** for all University of Vermont employees

For additional information use "*Handbook for Employers*" found at the following website:

<http://www.uscis.gov/sites/default/files/files/form/m-274.pdf>

***The New Online version of the form I-9 provides short explanations for each section. Click on the "Question Mark" in each box to see the explanation.**

***The online version will "auto-fill" some information if the form is filled out online. The online form offers "drop down" choices in certain sections of the form. The form can be saved without losing the information.**

***The online version cannot accept digital signatures. Once filled out electronically, the form must be printed and signed and dated with a pen.**

***It is highly recommended to print a copy of the Form I-9 instructions and follow the instructions while filling out the Form I-9 the first few times you use the new format.**