

UNIVERSITY OF VERMONT REMOTE HIRE NOTICE FORM

EMPLOYEE INFORMATION		
Last Name	First Name	M.I.
Date of Birth	Phone Number	E-mail Address
Employee's Date of Hire		
/ /		
(THIS DATE MUST BE ENTERED INTO THE CERTIFICATION SECTION OF THE I-9)		

UVM HIRING DEPARTMENT INFORMATION	
Department Contact (Name and Title)	Department
Human Resources	HR
UVM_Address	Street City State Zip Code
85 S. Prospect St. 228 Waterman Building, Burlington, VT 05405	
Phone Number	Fax Number E-mail Address
(802) 656-3150	(802) 656-3476 HRInfo@uvm.edu

AUTHORIZED REPRESENTATIVE INFORMATION	
Authorized Representative's Name	
Organization	
Address	Street City State Zip Code

The University of Vermont hereby authorizes the above Authorized Representative to Act as our agent/representative for the purposes of completing the Form I-9 for the employee named in section one of this form. This authorizes the above designee to sign on the Form I-9 as the employer, after they have reviewed and approved the appropriate documentation verifying the employee's eligibility for employment.

IF YOU ARE A NOTARY, PLACE NOTARY SEAL BELOW OR ATTACH A NOTARY CERTIFICATE

NOTE FOR HIRING DEPARTMENT: THIS FORM MUST BE COMPLETED AND GIVEN TO THE AUTHORIZED REPRESENTATIVE BEFORE THE FORM I-9 IS COMPLETED. THIS WILL ENSURE THAT THE HIRE DATE LISTED ON THE FORM IS PROVIDED AND VERIFIED BY THE HIRING DEPARTMENT.

UVM Department Contact Signature _____ Date _____

Once completed, please send this Remote Hire Notice, I-9 Form and a copy of the verification document(s) to Human Resources via [UVM Secure File Transfer](#) to hrinfo@uvm.edu.