HIRE **RIGHT**[®]

Electronic I-9 and E-verify Management

This training addresses employer features and details you may need to manage in HireRight.

HireRight Legal Notice:

These materials were prepared by HireRight for informational purposes only. These materials are not intended to be comprehensive, and are not a substitute for, and should not be construed as, legal advice or opinion. These materials contain HireRight confidential information, are directed solely to the intended recipient(s), and may not be further distributed without the express written permission of HireRight.





Agenda

- Overview
- Access HireRight I-9 Features
- Initiate Section 1 Completion
- Complete Section 2
- E-verify Check Process
- Additional I-9 Actions
- Additional E-verify Actions
- Update I-9 (Section 3)
- Getting Help

Helping You Remain Compliant & Informed

Regulatory Changes
 Employment Law
 Webinars
 Compliance Briefings



Simple, Secure and Direct

- Simplifies I-9 Form Completion
- Secure Storage
- Direct connectivity to E-verify
- Program Management Tools





Form I-9 and E-Verify Workflow

- 1. Employee completes Section 1 prior to start.
- 2. Employer completes Section 2 when the employee starts.
- 3. E-verify check process initiates after I-9 form is complete.

- 98% are returned "Authorized to Work"
- 2% require additional steps



Overview of E-Verify Process

- How Does E-Verify Work?
 - Form I-9 information is sent to through the E-verify check system
 - I-9 information is compared to confirm Employment Authorization
 - Results are returned 98% come back "Employment Authorized"

mployment Eligibility Verification – E	mployee I-9 Inform	ation
lead instructions carefully before completing to ompletion of this form.	his form. The instruction	ns must be available during
ANTI-DISCRIMINATION NOTICE: I uthorized individuals. Employers CAN ccept from an employee. The refusal to ave a future expiration date may also c	t is illegal to discrim NOT specify which d b hire an individual b constitute illegal disc	ninate against work- document(s) they will because the documents crimination.
ection 1. Employee Information and Ve mployee at the time employment begins.)	erification (To be com	npleted and signed by
Print Name: Last First Moore Julie	Middle Initial	Maiden Name
Address (Street Name and Number) 123 Beach Road	Apt. #	Date of Birth (month/day/year)
City State San Clemente California	Zip Code a 92672	Social Security # ***-**-1111
am aware that federal law provides or imprisonment and/or fines for false statements or use of false documents n connection with the completion of his form.	I attest, under penalty the following): A citizen of the Un A noncitizen nation instructions) A lawful permanen	of perjury, that I am (check one of nited States nal of the United States (see nt resident (Alien #)
	An alien authorized	d to work (Alien # or Admission #) ite, if applicable - <i>month/day/year</i>)
imployee's Signature Vulie Moore	Date (month/day/year) 02/22/2012	
Preparer and/or Translator Certification erson other than the employee.) I attest, under penal and that to the best of my knowledge the information i	n (To be completed and signed by the completed and signed by the complete structure and correct.	med if Section 1 is prepared by a sisted in the completion of this form
Preparer's/Translator's Signature	Print Name	
Address (Street Name and Number, City,	State, Zip Code)	Date (month/day/year)
		NEXT :

HireRight I-9 Account Features



Log into HireRight

Enter company ID, user name and password.

- This information is provided by HireRight via email

HIRE RIGHT	
Company ID:	
User Name:	
Password:	
Login	
Bookmark my login page	



Access I-9 and E-verify Tools

- Click on I-9 Forms
- Click on Manage I-9 Forms to open I-9 dashboard





I-9 Forms Dashboard

Tabs to support process and separate statuses.

Screening Manager	Manage I-9 F	orms ×						
New 🔻 📄 Print	🛛 🐻 Additional Co	olumns * 🛛 🕅	lore Options *				Ð	Refresh
All Users 👻	Last 90 days 👻						Refreshed	just now
Sent to Employee	Pending Employer	Completed	E-Verify Duplicate	E-Verify Tentative	Pending Info Review	Pending Photo Match	Final Non-Confirmation	-
								^
I-9 spe	cific status t	tabs			E-verify stat	us tabs		



Email Invite to Employee

- 1. I-9 Forms for options.
- 2. Manage I-9 Forms to access menu.
- 3. Invite Employee for email prompt.





Email Invite to Employee – cont'd.

4. Enter Employee's First and Last Name, email address.

*start date is not required but <u>recommended</u>

- 5. Notification Options (optional).
- 6. Click **SUBMIT** to send email.

mployee into	
First Name:* 🥝	4
Last Name:* 🥝	
E-mail:*	
Employee Start Date: 🥝	Entering a Start Date is optional. The Start Date controls when HireRight sends automated reminders (such as the reminder to employee to bring supporting documents, and
Message Template:* 🥝	reminder to complete I-9 form on Day 3).
	Send me a copy
Iotification Options Initiated by HireRight Hi Add users who will receiv	reRight Training (automatically receives all notifications) we copy of notification letters
	×
	•



Email Invite to Employee – cont'd. Hiring Manager Assignment

4. Enter Employee's First and Last Name, email address.

*start date is not required but <u>recommended</u>

- 5. Designate Section 2 completer in Hiring Manager fields.
- 6. Click **SUBMIT** to send email (not shown).

I-9 Employment Eligibility Form

Employee Info	
First Name:*	4
Last Name:* E-mail:*	
Employee Start Date:	Entering a Start Date is optional. The Start Date controls when HireRight sends automated reminders (such as the reminder to employee to bring supporting documents, and
Message Template:*	D(reminder to complete I-9 form on Day 3).
Send me a copy	
Hiring Manager	
Hiring Manager Name: E-mail:	5



Hiring Manager Notification Email

Sample email notification sent to advise assignment for Section 2 completion

Dear Steve Martin, James Cobb has completed Section 1 of the I-9 Employment Eligibility Form for ABC Technical, A Sales Demo Company. Please go to https://ows01.hireright.com/in.html?key=0251ADE81D4781AE45E810B06D190A2E to log in to the HireRight system to review Section 1 of the I-9 Form and complete and sign Section 2. Login: kari.talmadge@hireright.com Password: b9f43706 (a user-defined password will be established after login) You will need to view the employee's work eligibility documentation in order to complete Section 2. When you login to the system, you will see instructions on the left hand side that can assist you in completing this form. Our objective is to complete this process quickly and within the employee's first 3 days of employment. Please make every effort to accurately provide all of the requested information. If you need support, HireRight Customer Service is available 5 days a week from Sunday 3 p.m. until Friday 7 p.m. Pacific Standard Time by phone (toll free in the U.S.) at (866) 521-6995, or by a toll call elsewhere at +1 (949) 428-5804. Additional HireRight toll free numbers from many countries: http://www.hireright.com/Contact-Us.aspx#tab2 Thank You, Kari Talmadge



Email Invite to Employee – cont'd.

- Here's the confirmation message.
- Click Close to return to the Manage I-9 Forms dashboard.

essage Sent	
An email has been sent to the emplo	yee.
You will be notified by email once the check the status of the I-9 form under	e employee has completed Section 1 of the I-9 form. At any time, you can er the Manage I-9 Forms menu item.



New Hire Overview

All New Hires should access and complete their I-9 *prior* to their start date.

- Email provides direct, secure access
 - Directions
 - Resources
- Kiosk supports direct access, without email
- Email Notifications tied to optional Start Date
 - Complete Form
 - Bring Documents





New Hire: Directions

Clear Instructions and Embedded Support





Preparer/Translator Assistance

Response Required to Document form Completion





Employee Information

Employee Information						
Your Last Name: *	Cobb					
Your First Name: *0	James					
Your Middle Initial: *	S					
Icertify that I do not have any middle initial (if checked "N/A" will be displayed in the Middle Initial field of Section 1)						
Certify that I have not used any other last names (if checked "N/A" will be displayed in the Other Last Names Used field of Section 1)						
Your E-mail Address:						
Your Telephone Number:	+ 1 🗸 ext.					
Your Country: *	USA 🗸					
Your Address: *	123 South Street					
I certify that I do not have any apartment number (if checked "N/A" will be displayed in the Apt. Number field of Section 1)						
Your City: *	Long Beach					
Your State: *	California					
Your Zip/Postal Code: *	90807					
Your Date of Birth: *	12 / 19 / 1970					

Citizenship or Immigration Status

SSN is required for E-verify





Citizenship or Immigration Status

Helpful prompts and link to get I-94 number

What is your citizenship or immigration status? *	Alien Authorized to Work				
When are you authorized to work until? *	02 / 02 / 2020				
I certify I am an Alien whose authorization does not expire					
Provide your Alien or Admission or Foreign Passport number: * ⁽²⁾ Foreign Passport# ⁽²⁾ <u>Get I-94 Number Now</u>					
The Social Security Adm A social security number is one. If you do not yet have	inistration has not yet issued me a Social Security Number. s required on this form and you must provide your number if you have an SSN issued, you will be asked to provide one once it is issued.				

Employee Review and Signature/Submission

EMPLOYMENT ELIGIBILITY VERIFICATION

Section 1 Review & E-Sign by Employee

Fields marked with an * are required

- Directions
- Employee Information and
- Attestation Worksheet

Section 1 Review and E-Sign by Employee

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 <i>(if any)</i>		
Cobb James					S	N/A		
Address <i>(Street Number an</i>	Apt. Number	City or Tov	wn		State	ZIP Code		
123 South Street	N/A	Long Be	ach		CA	90807		
Date of Birth (mm/dd/yggy) U.S. Social Security Numb **/**/****			er Employee's N/A	s E-mail Add	iress	Emp N/A	loyee's Tel	lephone Number

Section 1. Employee Information and Attestation (Employees must complete and sign

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):

1. A citizen of the United States	
2. A noncitizen national of the United States (See instructions)	
3. A lawful permanent resident (Alien Registration <u>N/A</u> Number/USCIS Number)	
4. An alien authorized to work until (expiration date, if <u>N/A</u> applicable, mm/dd/yyyy) Some aliens may write "N/A" in the expiration date field.(See instructions)	QR Code - Section 1 Do Not Write in This Space
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 N/A Number/USCIS Number: OR	
2. Form I-94 Admission N/A Number: 0R 3. Foreign Passport N/A Number:	
Country of <u>N/A</u> Issuance:	

Employee Review and Signature/Submission

Electronic Signature of Emp	bloyee	
First Name: * Last Name: * E-mail Address:	James Cobb	New Hire enters name and month and day of birth
Month & Day of Birth: * Hold down left mouse button a	Dec 19	
	Loph	Optional mouse signature
Clear		New Hire provides e-signature
I am aware that federal law p documents in connection with	rovides for imprisonment and/or fines for false statements or u h the completion of this form. *	use of false validation
 I understand that I am using electronically. * I certify that the information to 	electronic means to sign this document, and I consent to signin hat appears above on the Form I-9 is exactly as I entered it in t	ng this document the Employee
Information and attestation V	Vorksheet. * ny information above, I am certifying that I am the person identi riding this information and clicking the "Electronically Sign" butt	ified by this ton below will
constitute my electronic signa	ature. *	



Employee Confirmation of Success!





Overview of Steps to Complete Section 2

No Later than Third Day of Start Date

Employer Responsibility

- Physically examine documents provided by New Hire
- Access I-9 via HireRight
- Complete Section 2
- Automated submission to E-Verify
- Uploads PDF of Documents in HireRight



HIRE RIGH

Section 2: Employer Completion

- 1. Click on I-9 Forms
- 2. Click on Manage I-9 Forms to open I-9 dashboard

Sten 1	HIRE RIGHT	Screening Manager		
otop i	E.g, Joe, Jo%, ab-12345670 Q	Orders and Reports	🗆 Maximize 🔗 Refresh	Announcements
		Print 🙀 Download More Options 👻		Welcome to
Step 2	 Y I-9 Forms Manage I-9 Forms Delete I-9 Forms 	Current User Last 7 days Invitations Not Submitted In Progress Completed Cancelled	Refreshed just now	HireRight Enterprise [™]
	Employment Screening	First Name Last Name SSN/National ID Status	Туре	
	Management Reports			shutdown
	Price List			10/01/2013 The SSN Verification product is unavailable due to a
	Billing			Government shut down.
	Account Setup			Criminal Background Checks
	Compliance Central			09/27/2013 HireRight Scheduled System Maintenance on October 10,
	> Forms & Documents			
	 Help & Training 		<u>~</u>	Recently Viewed Items
			2	
		Alerts	🗆 Maximize 🔗 Refresh	
		Current User 👻 Last 1 week 💌	Refreshed just now	
		Action Requests Information-only		
		Date	<u>^</u>	
				I



Section 2: Employer Completion

- 3. Click **New Hire** to select that record
- 4. Use **More Options** or **right-click** to select Verify I-9 Docs

\$ Screening Manager Manage I-9 Forms ×										
New *	Print Step 4	- N	Nore Options 🔻		9					
All Users	All Users 👻 Last 90 days 👻		Verify I-9 D	ocs						
Ctop 2	yee Pending Employer	Completed	View		Info Review	Pending Photo Match	Final Non-Confirmation			
Step 3	Last Name		Send Form			Next Action	Start Date			
Ronald	Rogers		Start/Termin	nation Dates	4	Complete Section 2				
Timothy	Talmadge		Reassign		4	Complete Section 2				
Timothy	imothy Smith		Correct I-9 Form		4	Complete Section 2	09/17/2014			
Jane	Doe		Set Hiring M	anager	4	Complete Section 2				
Timothy	Talmadge		Delete I-9 f	orm	4	Complete Section 2	09/03/2014			
Jane	Doe		Flag	•	4	Complete Section 2				
Jane	Anderson	*	**-**-1111	08/20/20	14	Complete Section 2				
Theodore	Smith	**	**_**-1111	08/06/20	14	Complete Section 2				



Super User | Tip

If you do not see the employee's name in the Pending Employer tab:

- Adjust filters
- Check Sent To Employee tab

Screening Manager Manage I-9 Forms ×						
New 🔹 📄 Prin	t 🛃 Additional Colu	imns * More Options *				
All Users 👻 Last 90 days 👻						
Sent to Employee	Pending Employer	Completed E-Verify Tentativ	Pending Info Review	Pending Photo Match	Final Non-Confirmation	
🖗 First Name	Last Name	SSN	Date	Next Action	Start Date	
Ronald	Rogers	***-**-1111	10/29/2014	Complete Section 2		
Timothy	Talmadge	***_**-1111	10/15/2014	Complete Section 2		
Timothy	Smith	***_**-1111	09/17/2014	Complete Section 2	09/17/2014	
Jane	Doe	***-**-1111	09/08/2014	Complete Section 2		
Timothy	Talmadge	***_**-1111	09/03/2014	Complete Section 2	09/03/2014	
Jane	Doe	***_**-1111	08/20/2014	Complete Section 2		
Jane	Anderson	***_**-1111	08/20/2014	Complete Section 2		
Theodore	Smith	***_**-1111	08/06/2014	Complete Section 2		



Resend to Employee if I-9 is not Complete

From Sent to Employee tab:

Click employee to select and use choose Resend.





Section 2: Employer Completion – Review Section 1

ard

Review Section 1

- The Section 2 completer is responsible for ensuring Section 1 is reviewed for accuracy before completing Section 2.
- Click NEXT to complete Section 2

	E	mployme	nt Eligibili	ty Verifica	ation			USCIS
	03	Departm	ent of Home	and Securit	ty		OM	IB No. 1615-0047
AND SEC	1	U.S. Citizens	ship and Imm	igration Serv	vices		E	cpires 08/31/2019
Section 1. Employee the first day of employee	e Information a	ind Attesta	re expiration di	ate may also o	constitute illegi	al disc	Nan	ne urate?
Last Name (Family Name) Cobb		First Name (James	Given Name)		Middle Initial	Other N/A	Last Name	es Used (if any)
Address <i>(Street Number and</i> 123 Main Street	1 Name)		Apt. Number N/A	City or Town Irvine			State CA	ZIP Code 12345
Date of Birth (mm/dd/yyyy) **/**/****	U.S. Social Securi	ity Number	Employee's E-n	hail Address			Employee'	s Telephone Numbe
connection with the cor I attest, under penalty of	npletion of this for perjury, that I am (c States If the United States (S	m. heck one of t lee instructions) on Number/US	the following b	<u>N/A</u>				
2. A noncitizen national o 3. A lawful permanent res 4. An alien authorized to	work until (expiration d	late, if applicab	le, mm/dd/yyyy)					

- BACK



Section 2: Employer Completion

Employee I-9 Information	Fields marked with an *	are required	Review	
Employer Review and Verification Worksheet Section 2 Review and E-Sign	Access Resources	obb of the United States	Instructio	ons
Earm I-9 Instructions	The employee must pre birth certificate. The em and determine if they re the document(s) do not employer must not acce document(s) the emplo	sent original documents, with the exception that the employee may present ployer must physically examine the actual document or documents present easonably appear on their face to be genuine and to relate to the employe reasonably appear on their face to be genuine or to relate to the person epi them in such circumstances, the employer should allow the employee yee wants to present from the "Lists of Acceptable Documents" for review	t a certified copy of a ted by the employee we presenting them. If presenting them, the to choose any other v and, if appropriate,	
Sample Document Images	Document A			
	Employers or their author first day of employment	prized representative must complete and sign Section 2 within 3 business d t. You must physically examine one document from List A OR examine	lays of the employee's a combination of one	
	Employers or their author first day of employment document from List B an this form. For each doc number, and expiration d	prized representative must complete and sign Section 2 within 3 business d t. You must physically examine one document from List A OR examine id one document from List C as listed on the "Lists of Acceptable Document ument you review, record the following information:" document title, issuin late, if any. esented a Receipt for a replacement of a lost, stolen, or damaged document.	lays of the employee's a combination of one s" on the next page of g authority, document	
	Employers or their author first day of employment document from List B an this form. For each doc number, and expiration d	brized representative must complete and sign Section 2 within 3 business d t. You must physically examine one document from List A OR examine id one document from List C as listed on the "Lists of Acceptable Document sument you review, record the following information: document title, issuin ate, if any. esented a Receipt for a replacement of a lost, stolen, or damaged document. Perm. Resident Card (Form I-551)	lays of the employee's a combination of one s" on the next page of g authority, document	
	Employers or their author first day of employment document from List B an this form. For each doc number, and expiration d The Employee has pr Document Title: * Issuing Authority: *	brized representative must complete and sign Section 2 within 3 business d t. You must physically examine one document from List A OR examine id one document from List C as listed on the "Lists of Acceptable Document ument you review, record the following information:" document title, issuin ate, if any. esented a Receipt for a replacement of a lost, stolen, or damaged document. Perm. Resident Card (Form I-551) U.S. Citizenship and Immigration Services •	lays of the employee's a combination of one s" on the next page of g authority, document	
	Employers or their author first day of employment document from List B an this form. For each doc number, and expiration d The Employee has pr Document Title: * Issuing Authority: * Issuing Authority: *	brized representative must complete and sign Section 2 within 3 business d t. You must physically examine one document from List A OR examine id one document from List C as listed on the "Lists of Acceptable Document trument you review, record the following information: document title, issuin ate, if any. esented a Receipt for a replacement of a lost, stolen, or damaged document. Perm. Resident Card (Form I-551) U.S. Citizenship and Immigration Services ▼ ng authority entered matches exactly to that of the document presented. *	lays of the employee's a combination of one s" on the next page of g authority, document	
	Employers or their author first day of employment document from List B an this form. For each doc number, and expiration d The Employee has pr Document Title: * Issuing Authority: * Issuing Authority: * Document #: *	brized representative must complete and sign Section 2 within 3 business d t. You must physically examine one document from List A OR examine id one document from List C as listed on the "Lists of Acceptable Document ument you review, record the following information: document title, issuin ate, if any. esented a Receipt for a replacement of a lost, stolen, or damaged document. Perm. Resident Card (Form I-551) U.S. Citizenship and Immigration Services ▼ ng authority entered matches exactly to that of the document presented. * EAC9876543210	Aays of the employee's a combination of one s" on the next page of g authority, document	
	Employers or their author first day of employment document from List B am this form. For each doc number, and expiration d The Employee has pr Document Title: * Issuing Authority: * Issuing Authority: * I certify that the issui Document #: * Expiration Date (if any):	Perm. Resident Card (Form I-551) U.S. Citizenship and Immigration Services Reader to that of the document presented. EAC9876543210 I certify the document the employee presented does not have an expiration date perm. Resident Card (Form I-551) Comparison of the document presented of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented for a replacement of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented for a replacement of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented for a replacement of the document presented. Perm. Resident Card (Form I-551) Comparison of the document presented for a replacement of the document presented. Perm. Resident Card (Form I-551) Perm. Resident	lays of the employee's a combination of one s" on the next page of g authority, document Format help Format help	S
	Employers or their author first day of employment document from List B an this form. For each doc number, and expiration d The Employee has pr Document Title: * Issuing Authority: * Issuing Authority: * I certify that the issui Document #: * Expiration Date (if any): *	prized representative must complete and sign Section 2 within 3 business d b. You must physically examine one document from List A OR examine id one document from List C as listed on the "Lists of Acceptable Document ument you review, record the following information: document title, issuin ate, if any. esented a Receipt for a replacement of a lost, stolen, or damaged document. Perm. Resident Card (Form I-551) U.S. Citizenship and Immigration Services ▼ ng authority entered matches exactly to that of the document presented. * EAC9876543210 08 / 01 08 / 01 1 certify the document the employee presented does not have an expiration date ext to E-Verify Photo Matching. You must retain a copy of the employee's	a combination of one s" on the next page of g authority, document Format help total	S



Section 2: Worksheet

- Complete the Worksheet
 - Confirm Employee's Start Date

Review your contact information for accuracy

Click Proceed to I-9 Form Completion -

EMPLOYMENT ELIGIBILITY VERIFICATION	Section 2 - Employer or Au	thorized Repres	sentative Re	v <mark>iew</mark> and Ver	ification V	Vorksheet
Directions	Fields marked with an # are rea	uired				
Employee 1-9 Information	Employee Name: James Cobb	luireu				
Employer Review and Verification Worksheet	Citizenship Status: Citizen of th	ne United States				
ection 2 Review and E-Sign						
rm I-9 Instructions 🥥	The employee must present orig	ginal documents, wit	h the exception	that the employe	e may prese	nt a certified copy of a
at of Acceptable Documents 🧼	and determine if they reasonab	ly appear on their fa	ce to be genuin	e and to relate to	the employ	ee presenting them. It
ho is issued This Document?	employer must not accept them document(s) the employee wan	In such circumstar its to present from t	he "Lists of Acc	eptable Docume	the employe	e to choose any othe w and, if appropriate
imple Document Images 🧼	acceptance, by the employer.					
formation on Receipts 🧼	This employer participates in th that you may accept List B docu document with a photograph an Please note that all documents p	e federal employme iments, only if they i d select below which presented by the new	nt eligibility pro nclude a photog document they w hire must be u	gram called E-Ve traph. Please ensishowed to you. nexpired.	rify. The E-V sure that the	erify program requires new hire shows you a
	List A			1	List B & C	
	Document A					
	Dodament A					
	Employers or their authorized re first day of employment. You m document from List B and one d of this form. For each document number, and expiration date, if a	presentative must co just physically exam- locument from List C you review, record 1 iny.	ine one docum as listed on the he following info	ent from List A (e "Lists of Accept ormation: docume	OR examine able Docum ant title, issui	a combination of on ents" on the next pag ng authority, documen
	The Employee has presented	a Receipt for a repl	acement of a lo	st, stolen, or dam	aged docum	ent.
	Document Title: *	U.S. Passport				~
	Issuing Authority *	U.S. Departmen	nt of State		•	
	I certify that the issuing auth	ority entered matche	es exactly to that	t of the document	presented.	*
	Document #: *>>	B123456				
	Expiration Date (if any). *	01 / 01	2027			
	This document is subject to E-	Verify Photo Matchi	ng. You must re	tain a copy of th	ne employee	's document.
	Employment Information					
	I attest under penalty of per that the above-listed documents	rjury, that I have exa	mined the docu	ment(s) presente	ed by the abo	ove-named employee
	entered above reflects the certify that the information e	information that ap intered above can be	pears on the o	riginal document te Section 2 of th	(s) presente ne 1-9 form.	d by the employee.
	Employee Start Date: *	01 / 04	2017 Us	e Today's Date		
	Business Name: *	ABC Company				
	Your First Name: *	Samantha				
	Your Last Name: *	Johnson				
	Title: *	Manager				
	Email Address: *	sjohnson@abco	company.com			
	Business Address *					
	Address:	1234 Main Stree	et			
	City:	Orange				
	State	California			*	
	Zip/Postal Code:	12345			<u> </u>	
					1	
			Earna 1.0.Com			

7. Complete the Worksheet | Additional Details

• List A or List B&C documents are entered directly into the form

List A		List B & C	
Document A			
Employers or their authorized rep first day of employment. You m document from List B and one do this form. For each document you number, and expiration date, if any	presentative must complete ust physically examine or cument from List C as list ou review, record the follo /. a Receipt for a replacemen	e and sign Section 2 within 3 business days of the ene document from List A OR examine a combinative on the "Lists of Acceptable Documents" on the ner owing information: document title, issuing authority, at of a lost, stolen, or damaged document.	employee's ion of one ext page of document
Document Title: *	U.S. Passport	•	
Issuing Authority: *	U.S. Department of	State •	Issuer
I certify that the issuing author	ity entered matches exactl	ly to that of the document presented. *	confirmation
Document #: *0	123456789		
Expiration Date (if any): *	12 / 12 / 202	20	Note the
This document is subject to E-V	erify Photo Matching. Yo	ou must retain a copy of the employee's document.	reminder
Section 2 Additional Information	nal information you need to	o document on the I-9 Form	

Section 2: Review & E-sign

- Review and E-sign
 - Enter Your First and Last Name -
 - Drawn signature is preferred
 - Read and check off attestation statements -
 - Click E-sign, Save and Run E-verify -

MPLOYMENT LIGIBILITY ERIFICATION	Section 2 Review & E-Sign						
ections	Section 2. Employer or Author	rized Representati	ve Review and	Verification			
ployee I-9 Information	(Employers or their authorized represe of employment. You must physically ex	entative must complete camine one document f	and sign Section rom List A OR a ci	2 within 3 busine ombination of on	ess days of the e document fr	employee's first om List B and one	
ployer Review and rification Worksheet	document from List C as listed on the	"Lists of Acceptable Do	cuments."J		Citiz	enship/Immigratio	
ction 2 Review and E-	Employee Info from Section Last Nam 1:	ae (Family Name)	First Name (G)	(van Name)	M.I. State	15	
	List A Identity and Employment Authoriza	OR	List B Identity	AND	Li Employment	st C Authorization	
	Document Title	Document Title		Docum N/A	sent Title		
	U.S. Passport Issuing Authority	Isaning Authority		Isouing	Authority		
	U.S. Department of State	N/A Document Number		N/A Docum	ent Number		
	B123456	N/A		N/A			
	Expiration Date (y [*] any)(mm/dd/333y) 01/01/2027	Expiration Date (f) N/A	any)(mm/dd/3333)	Expire N/A	tion Date (If any	((mm/dd/yyyy)	
	Document Title N/A	Additional Inform	ation QR Code - 1 Do Not Write	Sections 2 & 3 te in This Space			
	Issuing Authority	1					
	N/A Document Number	-1					
	N/A	-1					
	N/A	-					
	Document Title N/A						
	Issuing Authority	1					
	Document Number	-1					
	N/A Expiration Date (If on ()(mm/dd/1111)	-11					
	N/A						
	Last Name of Employer or Authorized Repre John son	Representative First Name of Employer or Authorized Represen Samantha			stative Employer's Business or Organization I9DNEW		
	Employer's Business or Organization Addres 1234 Main Street	is (Street Number and Nam	e) City or Town Orange		State	ZIP Code 12345	
					1.77.70	1.00000	
	Electronic Signature of Employer						
	First Name: *	Samantha					
	E-mail Address	johnson@abccomp	anycom				
	Hold down left mouse button and dra	w your signature belo	w				
	50	ja e					
	Clear CERTIFICATION - I attest, under I	penalty of perjury, that	(1) I have examin e genuine and to	ed the documer relate to the em	t(s) presented	by the above-na and (3) to the b	
	my knowledge the employee is aut	thorized to work in the	United States. *				
	 employee, (2) the above-listed doi my knowledge the employee is aut I certify that the information that Verification Worksheet. 	thorized to work in the appears above on 1	United States. •	actly as I enter	red it in the I	Employer Review	
	 employee. (2) the above-listed doin my knowledge the employee is au I certify that the information that Verification Worksheet. I understand that I am using electric 	thorized to work in the appears above on the ronic means to sign this	United States.	cactly as I enter	red it in the l	Employer Review ent electronically.	
	 employee, (2) the above-listed doin my knowledge the employee is automatic the employee is automatic that the information that verification Worksheet. I understand that I am using electron providing this information and click 	thorized to work in the appears above on the onic means to sign this primation above, I am c sing the "Electronically	United States. • ne Form I-9 is ex a document, and I ertifying that I am I Sign* button below	cactly as I enter consent to signif the person ident v will constitute n	red it in the in ng this docume ified by this in ny electronic s	Employer Review ent electronically. formation, and the ignature. *	

HIKE KIG

35

E Save

Section 2: Confirmation of Completion

- E-verify Check process begins
 - Completion of Section 2 instantly sends Employee data to E-Verify
 - E-Verify will typically respond instantly

Processing Request Please wait while your request is being processed
BireRight. customers erv be@hteright.com Phone: 866-521-6995, 949-428-5804 Pax: 877-797-3442, 949-224-6020


Section 2: Confirmation of Completion

- Form I-9 completed successfully
- E-verify Case Status



Upload Documents and then Close Window to return to HireRight



I-9 Form Process and Reminders

- All New Hires and Rehires must complete the I-9 prior to or on their first day
- Section 2 completion requires you to *physically* examine documents to prove both identity and proof of work authorization
- All I-9s must be completed no later than the third day of employment
- Reminders:
 - Upload a PDF of the documents after completing Section 2, if applicable
 - Review and Take Action on Emailed Notifications, as needed





Paper I-9 Form Process



 This is only done in cases where the Electronic I-9 could not be filled out to support a timely onboarding process.

Paper I-9 Form Process

After a paper I-9 form is completed

 Use Upload a Paper I-9 form to store the electronic image of the I-9 in HireRight <u>and</u> initiate the E-verify check, in one step.



- Reminder: Scan and save I-9 as a PDF so that it can be uploaded for electronic storage.
- Then, click NEW from the Manage I-9 Forms dashboard and select Upload I-9 Form for New Employee.



Paper I-9 Form Process: Create an E-verify Case

- 1. Upload the PDF of the completed I-9 form.
- 2. Employee Information: Complete fields using the information from Section 1 of the completed I-9 form.

EMPLOYMENT ELIGIBILITY VERIFICATION Employee I-9 Information	Upload I-9 Form for New En	nployee	You must have a fully completed I-9 form in order to complete this process.
Storage for Revisions Changes History Log	Warning		
	The documents you upload will This process may take up to se be available for downloading via	be transferred and st everal minutes. As soc a "View Uploaded Form	ored in our secure document storage. on as your document is uploaded it will n" action.
🔁 Form I-9 Instructions			
ᇌ List of Acceptable Documents 🥝	Create an E-Verify Case		
ᇌ <u>Who is Issued This Document?</u> 🥝	Create an E-Verify Case for thi	s employee	
ᇌ <u>Sample Document Images</u> 🥝	You must not use E-Verify to ve awarded a federal contract that	erify your current work	kforce unless your company has been
ᇌ Information on Receipts 🥝	other type of employer to verif	y its current workforc	e.
	Upload I9 Form		4
	Please locate the I-9 Form you woul files are accepted.	d like to upload and click t	the "upload" buttor nuing. Only PDF
	File to Upload: *		Browse
	- L	Jpload	
	Employee Information		
	Employee Last Name: *②		
	Employee First Name: *0		2
	Employee Middle Initial:		
	Employee Other Names Used (if any): *		
	I certify that the employee has n Other Names Used field of Sector	not used any other names tion 1)	s (if checked "N/A" will be displayed in the
	Employee E-mail Address:		



Upload Paper I-9 Form

- You must upload the completed paper I-9 form
 - Don't forget to upload documents

Jpload Supporting	Documents	
Please note that only The documents you may take up to seve	v PDF documents are accepted for upload. upload will be transferred and stored in our secure document storage ral minutes. As soon as your document is uploaded it will appear in the storage of the s	je. This process he list.
File To Upload:	U:\My Documents\1Desktop92915\sample I-9.pdf	Browse
Document Type:	Other Document (please describe below)	~
Document Description:	Paper I-9 Form	×
	Upload	
ist of Supporting	Documents	🔗 Refrest



Paper I-9 – cont'd.

- Citizenship and Immigration Status: Complete fields using the information from Section 1 of the completed I-9 form.
- 4. Employer Review: Complete fields using the information from Section 2 of the completed I-9 form.
- 5. Click Submit I-9 Verification.

Citizenship or Immigration Status	
What is the employee's citizenship or immigration status? * Employee's Social Security Number:	Select From List 3
Employer Review	
List A	List B & C
Document A	
Employers or their authorized representative must the employee's first day of employment. You must	complete and sign Section 2 within 3 business days of 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.



Manage Supporting Documents

- 1. Return to Manage I-9 Forms dashboard
- 2. Locate the employee's record and click to select
- 3. Use Manage Supporting Docs to 'Upload' documents after the I-9 process is complete



I-9 Email Notifications

- Section 1 is Complete
- Reminder to Complete I-9 Form (if Start Date is indicated)
- Upload Supporting Docs, if required for E-verify
- I-9 Form Modification/Correction Complete (Section 1)
- Work Authorization Expiration
- Reminder to Get Actual Document
- Update SSN



Additional I-9 Tasks



Correcting I-9 Forms

- Corrections may be made for the following reasons:
 - Section 1 errors must be corrected by the New Hire
 - Update an I-9 with newly issued SSN
 - Make necessary correction to Section 1 such as misspelled name
 - Section 2/3 errors must be corrected by Employer
 - Correct adjusted Start Date on Section 2/3
 - Correct Document information
 - Enter live document information (receipts)

Receipts

- Receipts for a replacement of lost, stolen, or damaged documents
- A receipt fulfills the verification requirements of the document for which the receipt was issued (can be List A, List B, or List C)
- A receipt is valid 90 days from date of hire or, for reverification, the date employment authorization expires.
- At the end of the receipt validity period, the actual document must be presented



Receipts (Continued)

• I-9 forms tracks if receipt was used and provides a reminder to collect actual document

List A		List B	& C
Document A			
Employers or their authorized repr You must physically examine one d document from List C as listed on you review, record the following in any.	esentative must complet locument from List A OR the "Lists of Acceptable [formation: document title	e and sign Section 2 within 3 bo examine of combination of one o Documents" on the next page of a, issuing authority, document no	usiness days of employment. locument from List B and one this form. For each document umber, and expiration date, if
The Employee has presented The receipt is valid for 90 da	d a Receipt for a replacen ys from the date of hire	nent of a lost, stolen, or damaged	l document.
Document Type:	U.S. Passport or U.S. F	assport Card	~
Document Title *]
Issuing Authority: *②]
 I have reviewed the document employee's document matches 	presented by the emplo s exactly the Issuing Auth	yee and confirm that the Issuing ority presented above.	Authority as reflected on the
 I have reviewed the document document does not match exa on the employee's document ir 	presented by the emplo ctly the Issuing Authority h the space above.	yee and the Issuing Authority as presented above. I will type the	reflected on the employee's Issuing Authority as reflected
Document #: *🥝]
Expiration Date (if any): *	mm / dd / y	The document the not have an expiration	e employee presented does n date



Receipts (Continued)

- Use Correct I-9 Form to open the I-9 Form and correct Section 2.
- Check the box next to Actual document presented, enter a new document number and expiration date.
 - Then click Next.
- If an E-Verify case is not needed, then click Submit Changes.
- For E-Verify Users: If you need to create an E-Verify case for this employee, click Save and Run E-Verify.
 - In most cases, this would have already been done in onboarding.



List	Α	List B	& C
Document A			
Employers or their authorized You must physically examine o document from List C as liste you review, record the followir any.	representative must comple one document from List A OR d on the "Lists of Acceptable ng information: document title	te and sign Section 2 within 3 bi examine of combination of one o Documents" on the next page of a, issuing authority, document n	usiness days of employmer locument from List B and or this form. For each docume umber, and expiration date,
The employee presented a RE Please select the checkbox E Marketual document presente	ECEIPT on Section 2. below once the employee pro d	esents the actual document.	
Cocument Type:	U.S. Passport or U.S. I	Passport Card	~
Document Title *	US Passport		
Issuing Authority: 💖	US Govt - Departme	nt of State	
 I have reviewed the document main and the second sec	nent presented by the emplo tches exactly the Issuing Auth	iyee and confirm that the Issuing ority presented above.	Authority as reflected on th
 I have reviewed the docur document does not match on the employee's document 	ment presented by the emplo n exactly the Issuing Authority ent in the space above.	oyee and the Issuing Authority as presented above. I will type the	reflected on the employee Issuing Authority as reflecte
Document # *			
Documentw.			



Making Corrections

- 1. Locate the I-9, right-click, and select *Correct I-9 Form*.
- 2. Click Submit.
- 3. An email is sent to the New Hire with a link to access the Form I-9.

Screening Manager	Manage I-9 Fo	orms ×		
New *	Additional Col	umns * Mo	re Options *	
Current User 👻	Last 90 days 👻			
Sent to Employee	Pending Employer	Completed	E-Verify Tentative	
First Name	Last Name	SS	N	
Ronald	Rogers	***	.**-1111	
Timothy	Smith	Verify I-	9 Docs	
Timothy	Talmadge			
Theodore	Smith	View		
		Send Fo	<u>.</u> .	
		Start/Te	rmination Dates	
		Reassig	n	
		Correct	I-9 Form	
		Set Hinn	g Manager	
	10.5-	Delete I		
	I-9 Em		Form	
	romin	-9 corrections options		
	Wh	at would you like to do with t	his form?	
	۲	Send Section 1 to Employee	Ronald Rogers	
		E-mail: *	krogers@hireright.com	
			EXAMPLE: Please enter	your name as it appears on
		Correction Reason:	your documents.	✓
			L	
				Submit
				Cubinit



No SSN on Start Date

- Start Date
 - New Hire completes section 1 marking they have not been issued SSN yet.
 - Employer completes section 2, but E-Verify doesn't run due to lack of SSN in section 1.
- After SSN Card Is Issued
 - Employer sends Section 1 back to the New Hire to correct once the SSN card is issued.
 - New Hire corrects section 1 to include SSN.
 - Employer right-clicks on the corrected I-9 record in HireRight and selects "Order E-Verify".
 - E-Verify runs its normal course.



No SSN on Start Date

E-verify will not occur without an SSN

Help Live Chat 🚔 Print						
-9 Employment Eligibility Form						
Thank You						
Thank you for your submission for James Cobb.						
Order Details						
Electronic I-9 Form	Created Successfully					
E-Verify Case Status	Error					
Warning						
Please note that an SSN is required on the I-9 Form and is required to his/her SSN, please use the corrections functionality to update the I-9	n an E-Verify Check. The employee has indicated on Section 1 that they do not yet have an SSN issued from the SSA. When the employee receives rm with the correct SSN value and then submit an a-la-carte E-Verify Check using the option "E-Verify Check".					
View I-9 Form Upload Supporting Documents Co	ct I-9 Form Close Window					

 Email reminder is sent to Section 2 Completer as a reminder to Update I-9 with newly issued SSN and initiate E-verify Check



Making Corrections

- 1. Locate the I-9, right-click, and select *Correct I-9 Form*.
- 2. Click Submit.
- 3. An email is sent to the New Hire with a link to access the Form I-9.

ree	ning Manager	Ma	anage I-9 Fo	orms	×			
ø	New 🔹 📄 Print	. A	Additional Col	umns *	More Options '			
Cun	rent User 👻	Last	90 days 👻					
Ser	nt to Employee	Pending	g Employer	Complete	d E-Verify Te	ntative		
<u>b</u> .	First Name		Last Name		SSN			
	Ronald		Rogers		***-**-1111			
	Timothy		Smith	Verif	y I-9 Docs			
	Timothy		Talmadge					
	Theodore		Smith	View	-			
				Send				
				Start	/Termination Da	ates		
				Reas	sign			
				Corre	ect I-9 Form			
				Set I	Hiring Manager			
				Dele	te I-9 form			
			I-9 Em	ployment Eligit	oility Form			
			Form	9 Corrections Opt	ions			
			Wha	at would you like to de	o with this form?			
			•	Send Section 1 to Emp	loyee			
				Applicant Name: * E-mail: *	krogers@hireright	.com		
					EXAMPLE: Plea	ase enter yo	our name as it appears on	
				Correction Reason:	your document			
							Submit	

So

No SSN on Start Date

- Form Initiator receives a Notification to update Section 1 of the I-9 form with live SSN information
 - You may wish to advise the new hire why the correction is being requested, as shown here

Dear James Cobb,
You completed an I-9 Employment Eligibility form online and submitted that form on 07/10/2018. You may now review your completed form and make any edits or corrections to the form as necessary.
Correction Reason: Please enter your social security number you recently received
Please review and correct this form as soon as possible by going to the website listed below. Enter the login and password, and Sign in to review and edit your I-9 Form.
Web Address: https://ows01.hireright.com/ac.html?key=E0340BA9BB51CC34D08238AB2FF0DBC3
Login: kari.talmadge@hireright.com Password: (use the password you created at the first login) (a user-defined password will be established after login)
Our objective is to complete this process quickly. Please make every effort to accurately provide all of the requested information. If you have any questions in completing the online I-9 Form, please contact HireRight Customer Service. Customer Service is available 24 hours a day, 5 days a week beginning Sunday 5 p.m. through Friday 9 p.m. Pacific Time (GMT -8). You can call them at: (866) 521-6995 (within the U.S. and Canada) +1 (949) 428-5804 (outside the U.S. and Canada).



No SSN on Start Date

Once Section 1 has been updated with the SSN, order the E-verify





Additional E-Verify Tasks Overview



E-verify Email Notifications

- Photo Match
- Reminder to Complete E-verify
- Referral Required
- Resubmission
- Action Required: SSA/Admission Number Mismatch
- Tentative Non-Confirmation
- TNC Final Status



Delayed E-Verify Status

- If the E-Verify status is not returned immediately, it remains in the Pending Employer tab. The pending status is most likely due to incorrect formats or insufficient data.
- For cases pending more than 10 federal workdays with no update, reach out to HireRight for assistance at 866-521-6995.
- E-Verify results are returned back to the HireRight account. The Section 2 completer should also be notified. Temporary and final status information is provided in the E-Verify Status column.



Pending Information Review

• Why: I-9 form information differs from what is on file for E-verify

I-9 Employment Eligibility Form	
Review E-Verify Information: Confirm information is correct	
Please check the information below to ensure it is correct. Make any upda	ates as necessary.
Last Name: *	Test
First Name: *	Test
Middle Initial:	
Other Names used (if any):	N/A
Social Security Number: *	111-11-1111
Date of Birth: *	12 / 19 / 1970
	Continue

Actions:

- ✓ Review the information for data entry errors, transposed numbers, etc.
- ✓ Correct any errors
- ✓ Click Continue to submit to E-Verify check



Pending Information Review

- There are two possible outcomes:
 - 1. Review for Errors
 - a) ACTION: Correct the E-Verify information and Continue to submit to E-verify.
 - b) Review the information. If no obvious errors are found, click Continue.
 - a) If a tentative non-confirmation is returned, follow the process of notifying the New Hire.
 - 2. No Errors, a TNC will be returned
 - a) ACTION: Meet with New Hire regarding TNC
 - Referral steps are referred to later in this training



Duplicate E-Verify Cases

- Why: A duplicate record was recognized within your account and requires resolution
 - Close E-verify Case
 - Ignore and Continue with E-verify

Edi	it View Favorites Tools	Help				
plic	ate E-Verify Alert					
-Verif	fy records indicate that case	es with the same S	SN num ber have been proce	essed for this employer w	vithin last 30 days	
	Case Num ber	SSN	Case Created On	Date of Hire	Bigibility Statement Text	
	2016091034338YX	***-**-000	03/31/2016 00:00	03/31/2016	Employee Referred to DHS	
You mu	ust choose one of the follow ing	options below :				
	o not continue this E-Verify case	- choosing this option	will close the E-Verify case that	t you just created *		
0.00			n n oloco no z volný odbo na	, jou juot or outou.		
	Reason for Closing: *	-Sele	ct a Reason-		\sim	
\sim						
() .	and a second state of the state of a second state of the second st		to the first second from the form of the second second	- (************************************	• • • • • • • • • • • • • • • • • • •	
() Igr	nore existing duplicate case(s), r	review /update the emp	loyee information below and cor	ntinue processing the E-Verif	fy case that you created. *	
() Igr	nore existing duplicate case(s), r First Name: *	review /update the emp	loyee information below and cor	ntinue processing the E-Verif	fy case that you created. *	
() Igr	nore existing duplicate case(s), r First Name: * Last Name: *	review /update the emp Kari Rogen	loyee information below and cor	ntinue processing the E-Verif	fy case that you created. *	
() Igr	nore existing duplicate case(s), r First Name: * Last Name: * Middle Initial:	review /update the emp Kari Rogen	koyee information below and cor	ntinue processing the E-Veri	fy case that you created. *	
() Iĝi	nore existing duplicate case(s), r First Name: * Last Name: * Middle Initial: Other Names Used:	review /update the emp Kari Roger	loyee information below and cor	ntinue processing the E-Veri	fy case that you created. *	
() Iĝi	nore existing duplicate case(s), r First Name: * Last Name: * Middle Initial: Other Names Used: SSN: *	review /update the emp Kari Roger 111-1'	koyee information below and cor 5	ntinue processing the E-Veri	fy case that you created. *	
() Igr	nore existing duplicate case(s), r First Name: * Last Name: * Middle Initial: Other Names Used: SSN: * Date of Birth: *	Review /update the emp Kari Roger 111-1' 12	koyee information below and cor S I-1111	ntinue processing the E-Veri	fy case that you created. *	
	nore existing duplicate case(s), r First Name: * Last Name: * Middle Initial: Other Names Used: SSN: * Date of Birth: *	Kari Rogen 111-1 12	loyee information below and cor s I-1111 / 19 / 1970	ntinue processing the E-Veri	fy case that you created. *	
⊖ Igr	nore existing duplicate case(s), i First Name: * Last Name: * Middle Initial: Other Names Used: SSN: * Date of Birth: * nore existing duplicate case(s) a	review /update the emp Kari Rogen 111-1 12 nd continue process in	loyee information below and cor 5 1-1111 / 19 / 1970 g the E-Verify case that you cre	ntinue processing the E-Verit	fy case that you created. *	n *
⊖ Igr	nore existing duplicate case(s), i First Name: * Last Name: * Middle Initial: Other Names Used: SSN: * Date of Birth: * nore existing duplicate case(s) a Reason for Continuing: *	review /update the emp Kari Rogen 111-1 ⁻¹ 12 Ind continue processin -Sele	loyee information below and cor s I-1111 / 19 / 1970 g the E-Verify case that you cre ct a Reason—	ntinue processing the E-Veri and the state of the spectrum of	fy case that you created. *	n. *
⊖ Igr	nore existing duplicate case(s), i First Name: * Last Name: * Middle Initial: Other Names Used: SSN: * Date of Birth: * nore existing duplicate case(s) a Reason for Continuing: * Specify Reason Text: *	review /update the emp Kari Rogen 111-1 12 nd continue processin Sele	loyee information below and cor s I-1111 / 19 / 1970 g the E-Verify case that you cre ct a Reason	ntinue processing the E-Veri eated. You are required to sp	fy case that you created. *	n. *
⊖ Igr	nore existing duplicate case(s), i First Name: * Last Name: * Middle Initial: Other Names Used: SSN: * Date of Birth: * nore existing duplicate case(s) a Reason for Continuing. * Specify Reason Text: *	review /update the emp Kari Rogen 111-1 ² 12 nd continue processin	loyee information below and cor s I-1111 / 19 / 1970 g the E-Verify case that you cre ct a Reason— Conti	ntinue processing the E-Verif eated. You are required to sp	fy case that you created. *	n. *



Photo Match

- Why: Certain List A documents are subject to photo matching, in accordance with E-verify requirements.
 - U.S. Passport, U.S. Passport Card, Permanent Resident Card, Employment Authorization Card

Action:

 Compare the Photo on the document to the Photo on the Photo Match prompt and indicate whether it is a match





Sample List A Photo Matching Documents

U.S Passport

- U.S. Passport Card
- I-551 (Permanent Resident Card)
- Form I-766 (Employment Authorization Card)



66

Document Retention

Document Imaging:

- 1. Scan the documents and save as a **PDF**
- 2. Review the image to make sure the image is clear

Document Retention:

- 1. Upload the **PDF** after completing Section 2
- 2. Delete the image once it has been uploaded











Photo Match Upload Required

• The system will prompt you if the photo requires uploading

Upload Supporting	Documents	
Per E-Verify Photo Document for this er	Matching requirements, you are required to upload a PDF copy of the Supporting nployee.	
Please note that onl The documents you may take up to seve	y PDF documents are accepted for upload. upload will be transferred and stored in our secure document storage. This process ral minutes. As soon as your document is uploaded it will appear in the list.	
File To Upload:	Choose File No file chosen	
Document Type:	Please Select Document Type	
	Upload	
ist of Supporting	Documents	Refresh



Photo Match: Referral

- If the Photo does not Match, an email notification will remind you of the need for Referral and prompt the Refer prompt in the message.
 - Referral process requires New Hire to contact the document issuer and resolve the issue in order to continue employment

Check the Photo Match tab for any additional steps

Referral steps are referred to later in this training

.011111	1 Employee Referral
By se has b	lecting Refer below, you are indicating that you have spoken to the employee about this Tentative Non-Confirmation status and the employee een provided the Referral Letter. If you have not spoken to the employee, click Cancel.
Selec	ing Refer below will start the 8 federal working days the employee is allowed to make initial contact with the SSA or DHS.
Aail Co	py of Employee Documents to E-Verify
Expre	ss mail a copy of documents to send to DHS if TNC is due to photo mismatch. Do NOT send original documents to USCIS.
U.S	Citizenship and Immigration Service
But	falo, NY 14202
Att	: Status Verification Unit - Photo Tool
In fo shi	rm all hiring sites of the USCIS shipping information. USCIS will not pay for any shipping costs. Participants are free to choose an express ping carrier at their own expense
Emplo Desig	yee has eight federal government workdays to contact DHS via instructions on the Referral Letter nated Agend checks E-Verify for case updates and follows steps to close case.
IMPO	RTANT: The employer may not ask the employee for additional evidence or confirmation that DHS resolved his or her case



E-verify Tentative Status: SSA or DHS TNC

• TENTATIVE E-verify Case Status requires you to provide Notification within 3 days

Help Live Chat 🚔 Print	
I-9 Employment Eligibility Form	
Thank You	
Thank you for your submission for Test Test.	
Order Details	
Electronic I-9 Form	Created Successfully
E-Verify Case Status	SSA Tentative Non-Confirmation
View E-Verify Report View I-9 Form	Upload Supporting Documents Close Window

Click shortcut link to View E-verify Report to access notification templates.



E-Verify Status Tabs

Screening Manager	Manage I-9 Forms	×			
New * Print Additional Column: More Opt as *					
Sent to Employee	Pending Employer Completed	E-Verify Tentative	Pending Info Revi	Pending Photo Mat	Final Non-Confir 🔻
First Name	Last Name	SSN	E-Verify St	atus Date	÷ 🔼
Julie	Moore	***-**-1111	SSA Tentativ	ve Non-Confirmation 1/09/2	2011
Alecia	Moore	***-**-1111	SSA Tentativ	e Non-confirmation 11/09/2	2011

No action required for Authorized status

🖉 New 🎽 📄 Print 🛛 🔃 Additional Columns 🆜 🛛 🛛		lore Options *				
All Users 👻 Last 7 days 👻						
Sent to Employee	Pending Employer Completed	E-Verify Tentative	Pending Info Rev	view Pending Photo I	Match Final Non-C	Confirmation
First Name	Last Name	SSN	E	Verify Status	Date	î
Chad	Smith	**-1111	1	Employment Authorized	06/01/2012	
					-	



Tentative Confirmations

- If a status of Tentative Non-Confirmation (TNC) is returned on an E-Verify, the employer must speak to the New Hire about the TNC and provide the Further Action Notice within 3 days of receiving status.
- The TNC status alone does not indicate that the New Hire is not authorized to work in the USA. This
 status indicates that the New Hire has an issue that needs to be resolved with the Social Security
 Administration or Department of Homeland Security in order to determine final work authorization
 status.
- If the employee chooses to contest the TNC Status, the employer will Refer the employee to the appropriate agency for resolution. At that point, the employee must take action within 8 Federal Government Working Days.
- If the employee does not take action within 8 Federal Government Working Days, a Final Non-Confirmation Status will be issued and the employer may terminate the employment.



Resolving Tentative Non-Confirmation (TNC)

- Meet with the New Hire within 3 days of receiving the status
 - Before Meeting
 - Access the E-verify Report
 - Print the Further Action Notice
 - During the Meeting
 - Review the notification with New Hire
 - New Hire must indicate, in writing, whether or not they will contest
 - Option to upload signed originals in HireRight
 - After Meeting
 - Refer Employee: For New Hires who Contest:
 - SSA TNC: Requires VISIT SSA local office to resolve www.ssa.gov/locator
 - DHS TNC: Requires TELEPHONE DHS to resolve (888-897-7781)
 - http://www.uscis.gov/e-verify/employees/how-correct-your-immigration-records
 - Close Case: For New Hires who do not wish to Contest

6	New 🔹 📄 Print	: 🛃 Additional Co	olumns *	More Options 🔻
All	Users 👻	Last 7 days 👻		View/Print
Se	ent to Employee	Pending Employer	Completed	E-Reassign tative Pending In
₽^	First Name	Last Na	me	Re-verify I-9 Form
	Chad	Smith		Manage Supporting Docs
				Refer Employee
				Close Case
				Send Form
				Start/Termination Dates
				View Audit Trail
				E-Verify Report
				Correct I-9 Form



Further Action Notice Location

File Edit View Favorites Too 🗴 🍚 Share Browser WebEx 👻	vls Help				
Report -					
ackground Verifications Download PDF Employment Eligibility	I-9 Employment Eligibility	^			
 English E-Verify Notices SSA Further Action Notice SSA Referral Date Confirmation Spanish E-Verify Notices SSA Further Action Notice SSA Referral Date Confirmation 	Name: Saturn DOB: SSN: Case Verification Number Received				
Miscellaneous Reviewer's Comments	The Case Verification Number for this employee's I-9 employment eligibility check is: Additional Company of the Case verification number alone does not indicate work eligibility.				
Applicant Reports ∃HE-082614-I I-9 Employment Eligibility (1/2	SSA Tentative Non-Confirmation Status Received - Employee Referral Required. A status of "SSA Tentative Non-Confirmation" has been received on this employee for the I-9 employment eligibility check. Please download and print the SSA Tentative Non-Confirmation Letter and Referral and present these documents to the employee to either contest this status and be referred to the appropriate agency for resolution, or agree to this status. This status alone does not indicate that this employee is not authorized to work in the USA. This status indicates that the employee has an issue that needs to be resolved with the Social Security Administration in order to determine final work authorization status.				


Resolving Tentative Non-Confirmation (TNC)

 For No Contest, upload or store the signed Further Action Notice Letter with the I-9/E-verify record and Close the Case. (see next slide)

- For **Contest**, you will need to select *Refer the Employee*.
 - » To refer, select the record, right-click, and select Refer Employee.





To Close Case

- 1. Go to E-verify Tentative tab
- 2. Right-click on New Hire
- 3. Select Close Case

New • Additional Columns •	More Options *			🖓 Refresh
All Users 🔹 Last 90 days 👻				Refreshed 2 minutes ago
Sent to Employee Pending Employer Completed	E-Verify Duplicate E-Verify Tentati	ve Pending Info Review	Pending Photo Match	Final Non-Confirmation
F-Verify Status	First Name Last Name	SSN	Date 🔅 Ne	ext Action
SSA Update and Resubmit - Referred	Jane Smith	***-**-1111	05/31/2018 -	
SSA Update and Resubmit - Referred	Tim Cobb	***-**-1111	04/20/2018 -	
SSA Tentative Non-Confirmation	Jane Doe	***-**-1111	04/10/2018 Prin	nt and Review TNC with Employee
SSA Update and Resubmit - Referred SSA Tentative Non-Confirmation SSA Tentative Non-Confirmation SSA Tentative Non-Confirmation SSA Tentative Non-Confirmation	Daniel Doss REGINALD BARCLAY Jessica Guinn Tobi Raymond Jane Smith Michael Burnam	View Reassign Re-verify I-9 Form Manage Supporting I Refer Employce Close Case Send Form Start/Termination Da E-Verify Report Correct I-9 Form Edit Flex Fields Delete I-9 form	04000 018 - 018 Prin 04022 018 Prin 02200 018 Prin 005500 018 Prin 018 Prin 018 Prin	nt and Review TNC with Employee nt and Review TNC with Employee



To Close Case

- Follow prompts to indicate the reason for Closing Case
 - New Hire is not contesting the status or taking recommended resolution steps
- Other Close Case Reason
 - I-9 had errors and needs to be redone

lose Case	
Verification Status:	SSA TENTATIVE NONCONFIRMATION
Have you (the employer) provi	ded a notification of the Tentative Non-Confirmation (TNC) to the employee?
• Yes	
No	
Please select from the options	below.
Employee still works for	the employer.
Employee does not work	r for the employer.
	Close Case

To Refer Employee

- 1. Go to E-verify Tentative tab
- 2. Right-click on New Hire
- 3. Select Refer Employee

New 🔹 📄 Print 🛛 🕞 Additional Columns 🔹	More Options *					🔗 Refresh
All Users 🔹 Last 90 days 🔹		-				Refreshed 2 minutes ago
Sent to Employee Pending Employer Completed	E-Verify Duplicate	E-Verify Tentative	Pending Info Review	Pending Phot	o Match	Final Non-Confirmation
E-Verify Status	First Name	Last Name	SSN	Date	. Nex	tt Action
SSA Update and Resubmit - Referred	Jane	Smith	***-**-1111	05/31/2018	-	
SSA Update and Resubmit - Referred	Tim	Cobb	***-**-1111	04/20/2018	-	
SSA Tentative Non-Confirmation	Jane	Doe	***-**-1111	04/10/2018	Print	t and Review TNC with Employee
SSA Update and Resubmit - Referred	Daniel	Doss	View	04/06/2 018	-	
SSA Tentative Non-Confirmation	REGINALD	BARCLAY	<u>^^^_1111</u>	04/04/2018	Print	t and Review TNC with Employee
SSA Tentative Non-Confirmation	Jessica	Guinn	Reassign	04/02/2 018	Print	t and Review TNC with Employee
SSA Tentative Non-Confirmation	Tobi	Raymond	Re-verify I-9 Form	03/29/2 018	Print	t and Review TNC with Employee
SSA Tentative Non-Confirmation	Jane	Smith	Manage Supporting [Docs	Print	t and Review TNC with Employee
SSA Tentative Non-Confirmation	Michael	Burnam	Refer Employee	03/28	Print	t and Review TNC with Employee
			Close Case	1		
			Send Form			
			Start/Termination Da	ates		
			E-Verify Report			
			Correct I-9 Form			
			Edit Flex Fields			
			Delete I-9 form			
			Flag	•		



78

To Refer Employee

- You will receive a prompt before referring employee.
- This is to ensure you have spoken to the New Hire prior to referral.

onfirm Employee	Referral
By selecting Refer and the employee I	below, you are indicating that you have spoken to the employee about this Tentative Non-Confirmation status has been provided the Further Action Notice . If you have not spoken to the employee, click Cancel .
Selecting Refer be DHS and generate employee.	low will start the 8 federal working days the employee is allowed to make initial contact with the SSA of a "Referral Date Confirmation" letter. Please print and provide Referral Date Confirmation letter to the

The timeline for resolution will now be monitored automatically. At that point, the New Hire must take action within 8 Federal Working days.



CONTEST: Referral Letter

Instructions for Employer

E-Verify 8 🐨 Referral Letter to the Social Security Administration (SSA) For SSA Field Office Staff: Use EV-STAR and See POMS RM 10245.005ff James Employee's Last Name Employee's First 4567 12/1970 Employee's Social Security Number Employee's Month/Year of Birth 02-08-2017 TST00248558140X Date Referred to SSA Case Verification Number SSN does not match: The name and/or date of birth entered for this employee do not match Social Security Administration records. Reason for this Referral Letter: SSN is invalid: The Social Security number entered in E-Verify is not valid according to Social Security Administration records SSA is unable to confirm U.S citizenship: The ditizenship status selected for this employee does not match Social Security Administration records SSN record does not verify, other reason: The Social Security Administration found a discrepan in this employee's record. SSA unable to process data: The Social Security Administration found a discrepancy in this Instructions for the Employer IMPORTANT The employee must sign and date below. 1. Review this Referral Letter (in private) with the employee as soon as possible 2. Ensure the name, Social Security number and month/year of birth at the top of this Referral Letter are correct. If this information is incorrect, you must close this case in E-Verify and create a new case with the correct IMPORTANT: If the employee cannot read, you must read this Referral Letter to the employee. If the employee does not fully understand English, and speaks Spanish, Chinese, Haitian-Creole, Japanese, Korean, Russian, Tagalog or Vietnamese, you must provide the employee with this Referral Letter in one of these languages, found in View Essential Resources.³ 3. You and the employee must sign and date this letter in the space provided below. 4. Give a copy of this signed Referral Letter in English to the employee and attach a copy to the employee's Form I-9. Inform the employee that he or she must bring this Referral Letter when he or she visits an SSA field office Complete all blank fields below ABC Technical, A Sales Demo Company Employer's Name Kari Talmadge 9494285800

Page 1 of 3 Referral Letter to the Social Security Administration Revision Date 01/	05/11		www.dhs.gov/E-
Employee's Signature	1	Date	
Employer Representative's Signature		Date	
Employer Representative's Name		Employer Representa	uve's Phone Num

/erify

Instructions for New Hire

8 🕋

www.dhs.gov/E-Verif

E Verify

Instructions for the Employee

Why You Received this Referral Letter to the Social Security Administration (SSA)

Your employer participates in E-Verify, a program managed by the U.S. Department of Homeland Security (DHS) and the Social Security Administration (SSA), E-Verify compares the information you gave on TH-9, Employment Eligibility Verification, with the government's records to verify that you are permitted on Korni He. United States.

You received this Referral Letter from your employer because E-Verify indicated that the information entered into E-Verify from your Form H-9 does not match SSA's records. You received an SSA Notice to Employee on Tentaisve Nonconfirmation' and you decided to contest. This does not mean that you gave incorrect information to your employer or that you are not permitted to work in the United States.

An SSA Tentative Nonconfirmation may occur if:

- Your citizenship or immigration status changed since you received your Social Security number.
 You did not report a name change to SSA.
- Your name, Social Security number, or date of birth was recorded incorrectly in SSA records.
- There is another type of mismatch with your SSA record.
 Your employer did not enter your information correctly in E-Verify.

What You Must Do

- Ensure that the name, Social Security number and month/year of birth on the first page of this Referral Letter are correct. Tell your employer immediately if there is incorrect information.
- You must visit an SSA field office within 8 federal government workdays from the date of this Referral Letter, by <u>62 / 18 / ***</u> (MM/DD/YYYY), to resolve your case.

To locate an SSA field office, visit <u>www.socialsecurity.gov/locator</u> or call SSA at 800-772-1213 (TTY: 800-325-0778). If you live in an area where there is a Social Security Card Center, you may be required to visit the Card Center.

Your employer cannot take any adverse action against you based on your decision to contest a TNC or while your case is still pending with SSA. Adverse actions include: terminating or suspending employment, withholding pay or training, defaying a start date or otherwise limiting your employment.

- 3. Bring this Referral Letter with you when you visit the SSA field office.
- 4. Bring the following original documents to the SSA field office, if you have them. SSA must see
 - Proof of your age; for example, a birth certificate or passport
 Proof of your identity; for example, a driver's license from a U.S. state
 - Proof of a legal name change; for example, a marriage certificate, if you changed your name since you
 received your Social Security number and
 - d. Proof of your work-authorized status:
 - If you are a U.S. citizen: proof of your U.S. citizenship, for example, a Naturalization Certificate. U.S. public birth certificate, or U.S. passport, or
 - If you are not a U.S. citizen: proof of your work-authorized legal alien status, for example, a Permanent Resident Card (Form 1-551 or "green card"), Employment Authorization Document (Form h-768), or Anrival-Departure Record (Form 1-94) showing work-authorized status.
- 5. This Referral Letter is important save a copy for your records.
- Tell your employer immediately if any of the information you gave changes as a result of your visit to the SSA field office so your employer can update its records.

For More Information

To contact SSA, call 800-772-1213 (TTY: 800-325-0778) or visit SSA's website at <u>www.socialsecurity.gov</u>. To find an SSA field office near you, visit <u>www.socialsecurity.gov/locator</u>.

For more information on E-Verify, including our privacy practices and program rules, visit the E-Verify website at www.dhs.gov/E-Verify.

Page 2 of 3 | Referral Letter to the Social Security Administration | Revision Date 01/05/11





Resolving Tentative Non-Confirmation (TNC)

Referral Date Confirmation Letter

 The E-Verify generated "Referral Date Confirmation" letter will appear in a new window with prepopulated instructions for New Hire.





Referral Process for Tentative Non-Confirmation (TNC)

- Referral Process
 - » New Hire continues to work during contest period
 - » Employer cannot take adverse action during contest stage
 - » New Hire has 8 government work days to initiate first contact
 - » Referral allows HireRight to automatically track this time frame
 - » HireRight continues to ping E-verify system for final/updated status
- Email Notification advises when Final Status is returned



E-Verify Interim and Final Statuses

Interim Statuses:

- **DHS Verification in Progress:** DHS is still processing the initial E-Verify check.
- SSA/DHS in Continuance (Institute Additional Verification): Indicates that the DHS needs more than 10
 Federal Government workdays to resolve the case. The E-Verify report will update automatically when DHS
 has more information to provide.

Final Statuses:

- Authorized/Employment Authorized: Authorized for employment

No action required.

- **SSA/DHS Final Non-Confirmation:** Referral process complete but employment eligibility could not be verified.

Required Action: Employee may be terminated. You must Close Case.

- **DHS No Show:** Referred but Future New Hire did not contact the agency within the 8 government business days.

Required Action: Employer must decide if the Future New Hire will be terminated. Close Case action must be taken. I-9/E-verify record will remain in final status tab that was issued prior case closure.



Section 3: I-9 Form Re-Verifications



Section 3 Completion

- 1. Name Change
- 2. Rehire
- 3. Expired Work Authorization
- New documentation has to be provided by the employee for continued employment.



Use Search to find an Existing I-9 form

- Click result to select
- Be sure it is the <u>I-9 Form</u>, not the E-verify or Background Report record type.
- Right-click for the menu.

				HireRight Tr	aining, <u>Siqn Out</u>
Screening Manager	Manage I-9	Forms × Search	(green)	×	
Print 🖷 Download	🚚 Note		Smart Search	Search All Accoun	its -> Search
Search For: green	djudication		۹	Right-click t access ava	to ilable
🖗 First Name	Last Name	View/Print	Туре	actions	¥
Tammy	Green	Send Form	I-9 Form	06/12/2014	HE-061314-
Tammy	Green	Start/Termination Dates	Background Requ	est 06/13/2014	HE-061314
		E-Verify Report			
		Manage Supporting Docs Reassign			
		Re-verify I-9 Form			
		View Audit Trail			
		Correct I-9 Form			
		Delete I-9 form			
	Screening Manager	Screening Manager Manage I-9 Print Download Note Search For: green No Filter Pending Adjudication First Name Last Name Tammy Green Tammy Green	Screening Manager Manage I-9 Forms × Search Print Download Note Search Search Search For: green Image I-9 Form Image I-9 Form Image I-9 Form No Filter Pending Adjudication Image I-9 Form Image I-9 Form Image I-9 Form Image I-9 First Name Last Name View/Print Image I-9 Form Image I-9 Form Tammy Green Send Form Start/Termination Dates E-Verify Report Tammy Green Reassign Reassign Re-verify I-9 Form View Audit Trail Correct I-9 Form Delete I-9 form Flag Image I-9 Form	Screening Manager Manage I-9 Forms × Search (green) Print © Download © Note Search For: green View/Print Pending Adjudication First Name Last Name View/Print Tammy Green Send Form Start/Termination Dates E-Verify Report Manage Supporting Docs Reassign Re-verify I-9 Form View Audit Trail Correct I-9 Form Delete I-9 form Flag	Screening Manager Manage I-9 Forms Search (green) × Print Download Note Smart Search Search All Accourt Search For: green Q Right-click faccess avaa actions No Filter Pending Adjudication Type First Name Last Name View/Print Type Tammy Green Send Form Start/Termination Dates E-Verify Report Manage Supporting Docs Reassign Reassign 1-9 Form 06/13/2014 View Audit Trail Corrent 1-9 Form Delete 1-9 form 1-9 form



Section 3 Completion

- Complete Required Information fields, as needed, to document the update.
- Click Proceed to Form I-9 Completion and employee's applicable I-9 information is updated.

VERIEIOATION			
VERIFICATION	Fields marke	ed with an * are required	
Directions Updating and Reverification Worksheet	Employee N Citizenship	lame: James Cobb Status: Citizen of the United States	
Section 3 Review and E-Sign	Information F	Required for I9DNEW	
	Location *	Irvine	۲
Form I-9 Instructions @	To be comp	leted and signed by employer or authorized repres	sentative
Who is Issued This Document?	Purpose of R	everification	
Sample Document Images	Em Em Em	nployee Name Change nployee Rehire nployee Work Authorization renewal	

87



Start/Termination Dates

- You can change the Start Date up until Section 2 completion.
- Termination date can be manually entered or submitted in large batches for upload by your organization.





Self-Support Resources

E.g, Joe, Jo%, ab-1234567 Q
DHS Manager
> I-9 Forms
My Collection Sites
> Employment Screening
Management Reports
Price List
Billing
> Account Setup
Compliance Central
> Forms & Documents
> Guidelines
› Help & Training 🌟
ONLINE TRAINING

Click Help & Training for Live Help and Training Materials.



Getting Help

Customer Service Hours of Operation

Sunday 5:00pm Pacific - Friday 7:00pm Pacific





90

Thank you!

