	<b>Agency Name</b>		Office of Family Support (OFS)	
	<b>Chapter No./Name</b>		06 - Personnel Manual	
	<b>Part No./Name</b>		Y. Forms and Forms Instructions	
	<b>Section No./Name</b>		Y-600 Miscellaneous Forms and Forms Instructions	
	<b>Document No./Name</b>		I 9 Frm and Ins Employment Eligibility Verification (I 9)	
	<b>Dates</b>	<b>Issue</b>	August 1, 2005	<b>Effective</b> August 1, 2005

STOCKED: The current version of the form is available on the US Citizenship and Immigration Services website at <http://uscis.gov/graphics/formsfee/forms/i-9.htm>

## ➤ PURPOSE

- To document an employee's eligibility for employment under the Immigration Reform and Control Act of 1968.

## ➤ PREPARATION

- Section 1 - Completed by the employee

All employees must complete, sign, and date Section 1, with particular attention to the completion of one box only regarding citizen/alien status. This is done at the time of appointment.

If Section 1 is completed by someone other than the employee, the preparer must complete the Preparer/Translator Certification Block.

- Section 2 - Completed by the Manager

One document from LIST A or one from LIST B, and one from LIST C must be presented. Document(s) should be photocopied. Employee must present an original document(s) which establishes identity and employment eligibility within three business days of the date employment begins. The only exception to an original document is a certified copy of a birth certificate. The Manager may not specify which document(s) an employee must present.


One document from LIST A or one from LIST B, and one from LIST C must be examined. Section 2 must be completed based on the document(s) examined. (Photocopying documents does not relieve the Manager from fully completing Section 2). Record the title, issuing authority, number, and expiration date (if any) of the document(s).

All certification items, including date of hire, are to be completed. The signature and printed/typed Name of Certifier must appear. Enter OFS Organization name for Business or Organization name.

- Section 3

This section is not used unless an I 9 is being updated. Rehired employees are required to complete a new form.

## ➤ DISPOSITION

	<b>Agency Name</b>		Office of Family Support (OFS)			
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Manager retains one copy of the form and documentation in employee's personnel folder in and submits original I 9 form to the OFS Human Resources Section with EAU appointment package.