



OFFSITE NEW HIRE FORM I-9 COMPLIANCE

INSTRUCTIONS FOR UNIVERSITY REPRESENTATIVE OR NOTARY PUBLIC

Completion of the I-9 Form

U.S. Citizenship and Immigration Services (USCIS) require us to verify the right of our employees to work in the U.S. We are asking you to act as our representative to examine the employment identification papers for a new George Mason University employee and certify his/her eligibility by signing the attached USCIS Form I-9.

Please find attached the Form I-9 and Remote New Hire Notice Form.¹ Please verify that the employee has completed section 1 of the I-9 form prior to your completing section 2. The employee must present original documents from page three of the Form I-9 “List of Acceptable Documents” page.

The employee can present either:

1. Any one document from List A **or**
2. Two documents, one from List B (identity) **and** one from List C (eligibility).

Please complete Section 2 – Employer Review Verification and the Certification Section of the I-9 form.

Section 2 – Employer Review Verification: Please view only original documents; faxes, photocopies, and laminated social security cards are unacceptable documents.

Certification Section: Please complete the Certification section as follows:

1. Enter the employee’s date of hire (from the *Remote New Hire Notice Form*).
2. Sign the Authorized Representative section.
3. Date the I-9 form (enter the date you reviewed the employee’s documents).

If you have questions, please contact the George Mason University department representative listed on the *Remote New Hire Notice Form*.

Thank you for your assistance.

Please return completed forms to the employee, _____, who is responsible for submitting them to his or her employing department.

¹ *Note for Notary Publics: There is one additional form that needs to be completed if the Form I-9 is being completed by a Notary Public. It is the “Notary Form for I-9 Processing.”*



REMOTE NEW HIRE NOTICE FORM

EMPLOYEE INFORMATION:

Name:

Last _____ First _____ M.I. _____

Date of Birth _____

EMPLOYEE'S HIRING DEPARTMENT CONTACT INFORMATION – to be completed by the Hiring Manager only.

Contact Name: _____

Contact Title: _____

Contact Phone Number: (____) _____

EMPLOYEE'S DATE OF HIRE _____

(THIS DATE MUST BE ENTERED INTO THE CERTIFICATION SECTION OF THE I-9 FORM BY THE AUTHORIZED AGENT).

DEPARTMENT CONTACT SIGNATURE

DATE

THIS FORM MUST BE COMPLETED AND GIVEN TO THE AUTHORIZED AGENT **BEFORE THE I-9 FORM IS COMPLETED.**