**<https://www.shrm.org/ResourcesAndTools/tools-and-samples/hr-forms/Pages/I9-Authorized-Representative-Instructions.aspx>**

**Authorized Representative Instructions for Completing Form I-9**

***To be completed by the employer:***

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Representative name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

You have been asked to act as an authorized representative of *[Company Name]* for the purpose of completing Form I-9, Employment Eligibility Verification for the following individual:

Employee name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  New hire First day of employment (mm/dd/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Reverification Date work authorization expires (mm/dd/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Instructions for the authorized representative:***

**New Hire I-9 Instructions**

Please follow these instructions regarding completion of Section 2 of Form I-9 on behalf of *[Company Name]*.

* Check that Section 1 has been completed by the employee.
* Ask the employee to present original documents from the attached list of acceptable documents. Either one document from List A, or a document from both List B and List C.
* Physically examine each document to determine if it reasonably appears to be genuine and to relate to the person presenting it. If you determine that the document does not reasonably appear to be genuine and relate to the individual, ask them to present other documentation from the list of acceptable documents.
* In Section 2, enter the document title, issuing authority, number(s) and expiration date(s) (if any) from the original document(s) the employee presented.
* Enter the employee’s first day of employment as noted above.
* Enter your first and last name and title. Sign and date the form.
* The employer will enter the business name and address.
* *[If you consistently retain copies of the documents presented for Form I-9 for all employees, include the following text. If not, delete the text.]*Make a photocopy or take a picture of the front and back of the document(s) you examined. Attach the photocopy to the Form I-9 or email the pictures of the document(s) to *[email address]*.
* Return the document(s) to the individual.
* Mail the completed Form I-9 to *[Company Name]* at *[address]*.

**I-9 Reverification Instructions**

Please follow these instructions regarding completion of Supplement B (formerly Section 3) of Form I-9 on behalf of *[Company Name]*.

* Enter the employee’s last name, first name and middle initial at the top of Supplement B.
* Ask the employee to present acceptable documentation from either List A or List C of the list of acceptable documents showing their continuing authorization to work in the U.S.
* Physically examine each document to determine if it reasonably appears to be genuine and to relate to the person presenting it. If you determine that the document does not reasonably appear to be genuine and relate to the individual, ask them to present other documentation from either List A or List C from the list of acceptable documents.
* Enter the document title, issuing authority, number(s) and expiration date(s) (if any) from the original document(s) the employee presented in the reverification section of Supplement B of the Form I-9.
* Enter your name and sign and date the form.
* *[If you consistently retain copies of the documents presented for Form I-9 for all employees, include the following text. If not, delete the text.]*Make a photocopy or take a picture of the front and back of the document(s) you examined. Attach the photocopy to the Form I-9 or email the picture of the document(s) to *[email address*].
* Return the document(s) to the individual.
* Mail the completed Form I-9 to *[Company Name]* at *[address].*

Detailed instructions for Form I-9 are available at [www.uscis.gov/i-9](http://www.uscis.gov/i-9).