



ILLINOIS
HUMAN
RESOURCES



**Academic
Human
Resources**

Changes with Tracker
Version 8
Implemented 9/4/14



Academic Human Resources • Staff Human Resources
Faculty/Staff Assistance Program • UI Wellness Center
Center for Training and Professional Development

Dashboard

Electronic I-9 and E-Verify Dashboard, powered b...

Tracker
UNIVERSITY OF ILLINOIS
URBANA-CHAMPAIGN • CHICAGO • SPRINGFIELD

Dashboard **I-9 Complete Records** WebFax™ Inbox E-Verify Cases Reporting Resources Help August 29, 2014

Tracker I9 will be temporarily unavailable starting 1AM CST through 4AM CST on January 18, 2013 AND 10PM CST on January 18, 2013 through 4AM CST on January 19, 2013 due to scheduled system maintenance.

Search by Name Find [Go to Advanced Search](#)

Manage Employees

Create New

- I-9 Complete Record
- Create Historical Form I-9

Reports

- I-9 Complete Records
- More Reports

I-9 Complete Task Summary

Enter Start Date in Section 2: [120](#)

Form I-9 Section 1 Due: [118](#)

118 0 0

Form I-9 Section 2 Due: [97](#)

97 0 0

E-Verify Due or Pending: [33](#)

33 0 0

Employee Reverification Due: [77](#)

45 2 30

Employee Receipt Reverification Due: [9](#)

9 0 0

Audit Risk Exposure

- I-9s with Curable Errors: [231](#)
- I-9s that are Overdue: [302](#)
- E-Verify Cases Needing Attention: [33](#)
- I-9s with Incurable Errors: [38](#)
- Compliance Summary: [Take Action Now](#)

Top 10 Section 1 Due [View All](#)

Due Date	Employee Name	Start Date
5/31/2011	SMITH, Joe	5/31/2011
5/31/2011	HARRISON, Bella	5/31/2011
5/31/2011	SNODGRASS, Fester	5/31/2011
6/8/2011	SHAKE, Milk C	6/8/2011
6/30/2011	PINTOS, Sofia	6/30/2011
7/1/2011	HARRISON, Joe	7/1/2011
7/15/2011	KERBER, Test D	7/15/2011
7/18/2011	EMAIL, Test	7/18/2011
7/18/2011	FAX, Email	7/18/2011
7/18/2011	WEBFAX, Email	7/18/2011

Top 10 Section 2 Due [View All](#)

Due Date	Employee Name	Start Date
5/18/2011	HARRISON, Jim	5/18/2011
5/27/2011	HARRISON, Bella	5/25/2011
6/3/2011	HARRISON, George	6/1/2011
6/3/2011	MCGINNIS, Shannon	6/1/2011
6/20/2011	SEINFELD, Jerry M	6/15/2011
6/21/2011	NEWTON JOHN, Olivia	6/18/2011
6/30/2011	FLINSTONE, Fred H	6/27/2011

Top 10 Start Date Missing [View All](#)

Date Created	Employee Name	Start Date
5/12/2011	BUNNY, Bugs T	?

- **I-9 Complete Records** - Renamed Form I-9 Records tab
- Removed **Review I-9 Records**, **Create New Hire Login**, **Run Reports** from the **Manage Employees** box

I-9 Complete Records Tab

Tracker
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Dashboard | **I-9 Complete Records** | WebFax™ Inbox | E-Verify Cases | Reporting | Resources | Help

August 29, 2014

Tracker system | [Create New I-9 Complete Record](#) | [Review I-9 Complete Records](#) | [Create New Hire Login](#)

Search [] by Name [] Find []
[Go to Advanced Search](#)

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7/18/2011	FAY, Email	7/18/2011
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Top 10 Section 2 Due

Due Date	Employee Name	Start Date
5/18/2011	HARRISON, Jim	5/18/2011
5/27/2011	HARRISON, Bella	5/25/2011
6/3/2011	HARRISON, George	6/1/2011
6/3/2011	MCGINNIS, Shannon	6/1/2011
6/20/2011	SEINFELD, Jerry M	6/15/2011
6/21/2011	NEWTON JOHN, Olivia	6/16/2011
6/30/2011	FLINSTONE, Fred H	6/27/2011

Top 10 Start Date Missing

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- Click **Create New I-9 Complete Record** to start an I-9 for someone to complete while in your office. You can also click on the **I-9 Complete Record** link under the Manage Employees box.
- Click **Create New Hire Login** to create a Single-Use login, Multi-Use login or a login for the Remote Hire Process.

Creating a Historical I-9 (Reverifications for Employees who don't already have an I-9 in Tracker)

Tracker
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Dashboard | I-9 Complete Records | WebFax™ Inbox | E-Verify Cases | Reporting | Resources | Help | August 29, 2014

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Top 10 Start Date Missing [View All](#)

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➤ Click on the **Create Historical Form I-9** under the Manage Employees box

Historical I-9 – Supplementary Information

From the pull-down menu, please select the I-9 Form version based on the Form I-9 Revision Date that corresponds to the record you wish to import.

Search by Name Find [Advanced Search](#)

Import Historical Paper Form I-9 into Tracker I-9

Create New Historical I-9 Form

Supplementary Information

Relevant Information

* First Name: Middle Initial:

* Last Name:

Employee ID: Employer: University of Illinois

Historical E-Verify Case ID: Worksite: <None Selected>

Start Date: I-9 Manager: Menacher, UserRole

Termination Date: Form I-9 Rev. Date: Form I-9 Rev 03/08/13 (Current) [What is this?](#)

Notes

Save Cancel

Form I-9 History

[Generate Form I-9 \(PDF\)](#)

Signed Form I-9 Change Report

I-9 Resolve Alerts

- Added **Search functionality** eliminating the need to go back to the Dashboard
- Added **Historical E-Verify Case ID field** - for Campus HR use only

Edit Buttons in Section 1

Section 1. Employee Information and Attestation *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Edit Data Edit I-9

Last Name <i>(Family Name)</i> Employee 1		First Name <i>(Given Name)</i> Happy		Middle Initial	Other Names Used <i>(if any)</i>	
Address <i>(Street Number and Name)</i>		Apt. Number	City or Town		State	Zip Code
Date of Birth <i>(mm/dd/yyyy)</i>	U.S. Social Security Number		E-mail Address		Telephone Number	

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):

- A citizen of the United States
- A noncitizen national of the United States *(See instructions)*
- A lawful permanent resident (Alien Registration Number/USCIS Number): _____
- An alien authorized to work (expiration date, if applicable, mm/dd/yyyy): _____. Some aliens may write "N/A" in this field.

(See instructions)

For aliens authorized to work, provide your Alien Registration Number/USCIS Number OR Form I-94 Admission Number:

1. Alien Registration Number/USCIS Number: _____

OR

2. Form I-94 Admission Number: _____

If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

Foreign Passport Number: _____

Country of Issuance: _____

Some aliens may write "N/A" on the Foreign Passport Number and Country of Issuance fields. (See instructions)

Signature of Employee:	Date (mm/dd/yyyy):
------------------------	--------------------

- **Edit Data** (was Advanced Edit) – to be used to enter initial Historical I-9 data.
- **Edit I-9** (was Edit) – to be used to edit a Historical I-9 record after the initial data has been entered.

Edit Buttons in Section 2

Section 2. Employer or Authorized Representative Review and Verification

(Employer or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must 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.)

Edit Data

Edit I-9

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Type:		Document Type:		
Document Title:		Document Title:		
Issuing Authority:		Issuing Authority:		
Document Number:		Document Number:		
Expiration Date(if any)(mm/dd/yyyy):		Expiration Date(if any)(mm/dd/yyyy):		
Document Title:		Document Type:		
Issuing Authority:		Document Title:		
Document Number:		Issuing Authority:		
Expiration Date(if any)(mm/dd/yyyy):		Document Number:		
Document Title:		Expiration Date(if any)(mm/dd/yyyy):		
Issuing Authority:				
Document Number:				
Expiration Date(if any)(mm/dd/yyyy):				

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Edit Buttons in Section 2: Employer Signature

Section 2: Employer Signature

[Edit Data](#) [Edit I-9](#)

Certification

I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The Employee's first day of employment (mm/dd/yyyy): (See instructions for exemptions)

Signature of Employer or Authorized Representative		Date (mm/dd/yyyy)	Title of Employer or Authorized Representative	
Last Name (Family Name)	First Name (Given Name)	Employer's Business Or Organization Name		
Employer's Business or Organization Address (Street Number and Name)		City or Town	State	Zip Code

Section 3. Reverification and Rehires *(To be completed and signed by employer or authorized representative.)*

[View and Add New Section 3](#) [ADD HISTORICAL SECTION 3](#)

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