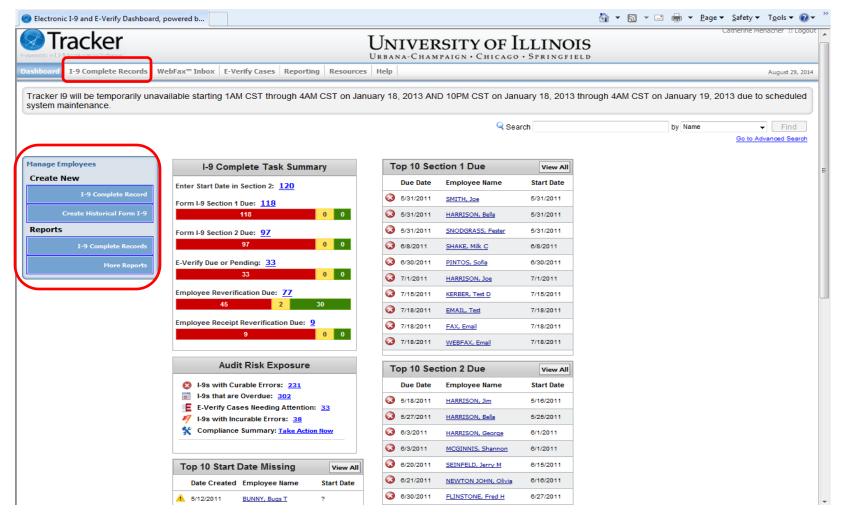


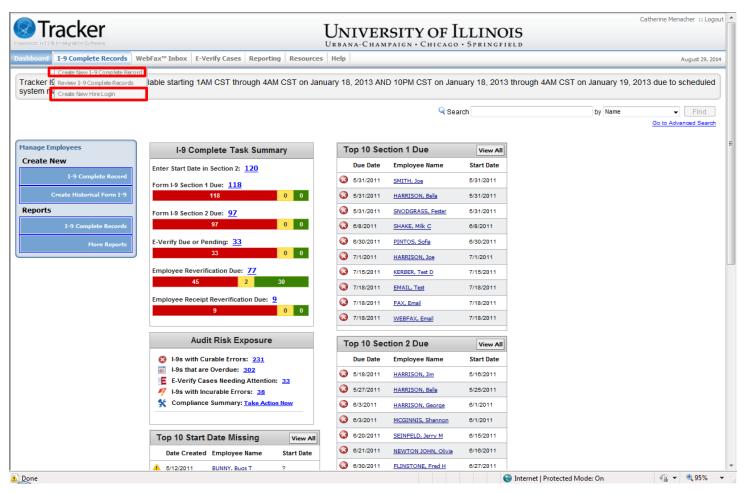


#### Dashboard



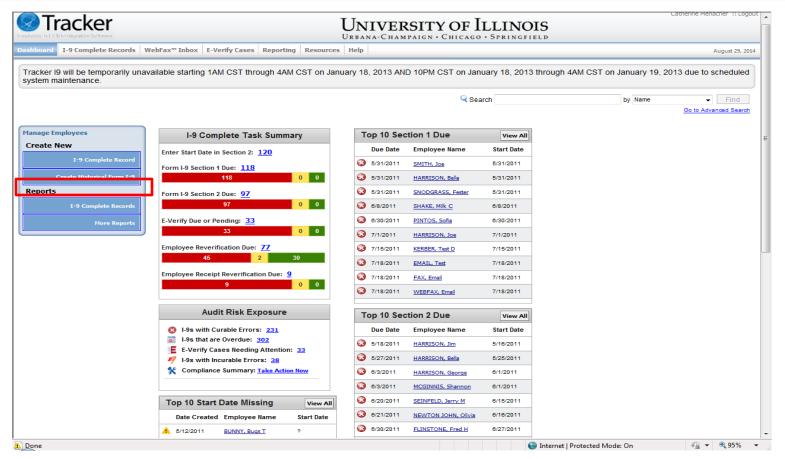
- I-9 Complete Records Renamed Form I-9 Records tab
- Removed Review I-9 Records, Create New Hire Login, Run Reports from the Manage Employees box

## I-9 Complete Records Tab



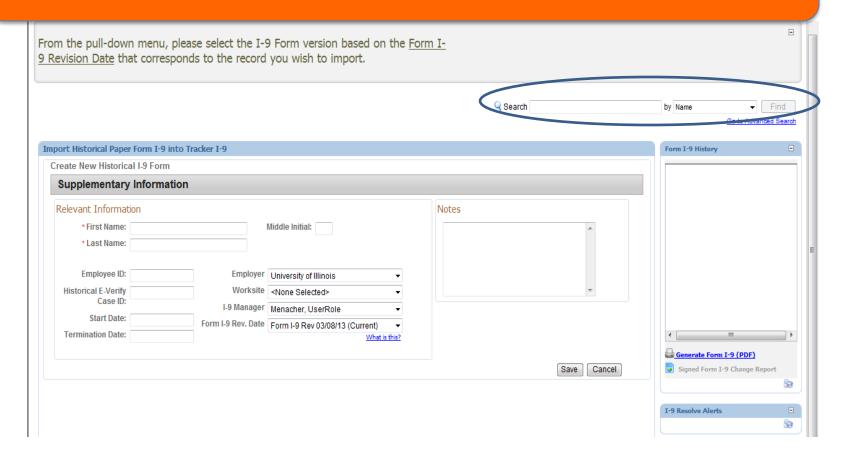
- Click Create New I-9 Complete Record to start an I-9 for someone to complete while in your office. You can also click on the I-9 Complete Record link under the Manage Employees box.
- Click Create New Hire Login to create a Single-Use login, Multi-Use login or a login for the Remote Hire Process.

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



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

## Historical I-9 – Supplementary Information



- 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 Info	ormation and	l Attestation	(Employees must d	complete and sign Se	ection 1 of	Form I-9 no later than	the first day of employment, but not before		
ocepung a job oner.j							Edit Data Edit I-9		
Last Name (Family Name)	st Name (Family Name) First Name (Given Name)					Other Names Used (if any)			
Employee 1	Нарру								
Address (Street Number and Name) Apt. Number		Apt. Number	City or Town			State	Zip Code		
Date of Birth (mm/dd/yyyy)	U.S. Social Secu	ırity Number	E-mail Address			Telephone Number			
am aware that federal law prov attest, under penalty of perjury,				ments or use of fa	alse docu	ments in connect	ion with the completion of this form		
A citizen of the United States	3								
A noncitizen national of the l	Jnited States (See	e instructions)							
A lawful permanent resident	(Alien Registration	on Number/USCIS	Number):						
An alien authorized to work	(expiration date, i	f applicable, mm/c	dd/yyyy):	. Some a	liens may	write "N/A" in thi	is field.		
(See instructions) For aliens authorized to wor	k, provide your Al	ien Registration N	lumber/USCIS N	lumber OR Form I	-94 Admi	ssion Number:			
1. Alien Registration Number OR	r/USCIS Number:			_					
2. Form I-94 Admission Num	ber:								
If you obtained your admissi the following:	on number from (	CBP in connection	with your arriv	al in the United S	tates, inc	lude			
Foreign Passport Number:									
Country of Issuance:									
Some aliens may write "N/A	" on the Foreign P	assport Number	and Country of	Issuance fields. (	See instr	uctions)			
ignature of Employee:				Date (mm/dd/vv	/vv):				

- ➤ 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

	B and one	document from List C as listed on the "Lists of Accept		oyment. You must physically examine one document from the next page of this form. For each document you re
List A Identity and Employment Authorization	OR	List B	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):				

- 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: Employer Signature

Section 2: Employer Signature								
						Edit Data Edit I-9	)	
Certification I attest, under penalty of perjury, that (7) be genuine and to relate to the employe	•			•		(2) the above-listed document(s) appear to vork in the United States.		
The Employee's first day of employmen	nt <i>(mm/dd/yyyy):</i> (S	See instruction	ns for (	exemptions)			_	
Signature of Employer or Authorized R	Date (mm/dd/yyyy)			Title of Employer or Authorized Representative				
Last Name (Family Name)	First Name (Given I	Name)	Emplo	Employer's Business Or Organization Name				
Employer's Business or Organization	mber and Nan	ne)	City or Town	State	Zip Code	_		
Section 3. Reverification at	nd Rehires (To b	be completed	and s	igned by employer o	or authorized repre	esentative.)		
View and Add New Section 3	ADD HIST	FORICAL SEC	TION 3					

- 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.