Form I-9: Refresher Training
Today’s Agenda

I. What’s an I-9
II. Harvard’s Process: New Hires, Re-Certification
III. Review the I-9
IV. Types of Visas / Class Exercise
V. For More Information
Form I-9

- **Full Title:** Form I-9, Employment Eligibility Verification

- **Purpose:** completed by all newly hired employees in order to verify their identity and authorization to work in the United States.

- **Affects:** US Citizens and Non-US Citizens working in the US
  - ✓ New Hires
  - ✓ Rehires
  - ✓ (non-US Citizens only) – any status change, such as from an H1-B Visa to Permanent Resident

- **Issued By:** Department of Homeland Security (DHS), U.S. Citizenship and Immigration Services (USCIS)
I | Who Completes this Form?

Section 1: Employee

- Any person to perform labor or services
- New employees hired after November 6, 1986
- Rehires (knowingly > than 3 years)
- Recertification

Section 2: The Employer

- Examine and record document(s) provided
- Attestation

Section 3: Recertification (do not use)

- Harvard Process – do not use this section. For recertification, complete Sections 1 & 2 of a NEW I-9
II | Harvard Process
II | New Hires: On-boarding Process

Offer Accepted → Completed I-9 to Central Payroll*

*ASAP! Central Payroll has a 24-hour turnaround time on correctly completed forms

Job pushed to PS → 1-2 days

- ID Card
- Tub’s Directory Contact
- HR/Fin Authorized Requestor

Applications

E-mail Phone
Payroll Process (24-hours)
- Reviews the I-9 and supporting documentation
- Adds SSN (or dummy SSN) to the I-9 table and checks “Eligible to work in US”

Remember Those Payroll Calendar Deadlines

- Biweekly pay period
- Last day you can submit to PS
- Payroll calculation NO SUBMITTING
- Check Date
II | I-9 Re-Certification

1. **MONTHLY:** Run the Visa Expiration Report: Harvard Reports > Payroll Related > Visa Expiration Report

   This report returns all visas that either have expired or will expire in 180 days.

<table>
<thead>
<tr>
<th>PAYGR DEPTID</th>
<th>DEPARMT</th>
<th>LAST NAME</th>
<th>FIRT NAME</th>
<th>EMPID</th>
<th>JOBCODE</th>
<th>COUNTRY</th>
<th>CITIZENSHIP</th>
<th>VISA TYPE</th>
<th>EFFECTIVE</th>
<th>EXPIRATION</th>
<th>DURATION</th>
<th>PERMIT TYPE</th>
<th>STATUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>WTM</td>
<td>123457</td>
<td>HMS*Drs Brample</td>
<td>Bperson</td>
<td>22334455</td>
<td>700000</td>
<td>JPN</td>
<td>Alien Temp</td>
<td>F-1</td>
<td>9/13/2011</td>
<td>6/7/2012</td>
<td>Months</td>
<td>Granted</td>
<td></td>
</tr>
<tr>
<td>POU</td>
<td>123458</td>
<td>HMS*HCC Casample</td>
<td>Cperson</td>
<td>33455566</td>
<td>403080</td>
<td>UNK</td>
<td>Alien Temp</td>
<td>F-1</td>
<td>4/15/2011</td>
<td>3/8/2012</td>
<td>Years</td>
<td>Applied For</td>
<td></td>
</tr>
</tbody>
</table>

2. Contact the employee to bring in updated documents.

3. Complete a **NEW** Form I-9, sections 1 and 2.

4. Send the completed I-9 and document copies to Central Payroll.

   - Update HUID = 22222222
   - Paygroup = POU

   - Expiration Date (if applicable)
   - Hire Date

   CERTIFICATION: the above-listed document(s) appear to record dates on or before 01/10/2012, and employment agencies may omit the dates.
Working with the HIO

- www.hio.harvard.edu
- Sponsorship Submittal
- Working through all necessary paperwork
- Extension Requests
  - Example: submitting a Form I-129 – indicating a continuation of employment
II | Expired Visas

Harvard’s Process for Expired Visas (March 2012):

• Direct deposit is turned off, and physical checks are created
• Tub instructs the employee to stop working until he or she provides a new Form I-9 with supporting documentation
  ❖ You may work with the employee and the HIO – for example, for an H-1B extension
• Once the I-9 is received, Central Payroll re-establishes direct deposit.

If the employee **cannot** recertify, he or she is given outstanding checks and removed from active payroll *by their local department* – they are no longer eligible to work.

Penalties for Hiring/Continuing to Employ Unauthorized Aliens

• **Individuals** can be held personally responsible
• Fines may be assessed *per unauthorized alien*
  First Offense $375 - $3,200
  Second Offense $3,200 - $6,500
  Third Offense $4,300 - $16,000
III | Review the I-9
III | Section 1: Employee Info and Verification

Common Mistakes

- No checkbox selected
- Second or third box checked, but number and/or date not provided
- Fail to sign or date form
III | Section 1: Who Am I?

Citizen of the United States

Non-Citizen US National

Lawful Permanent Resident (Green Card Holder)

Alien Authorized to Work

I, [Name], declare 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 #)
☐ An alien authorized to work (Alien # or Admission #) ______ until (expiration date, if applicable - month/day/year)

USCIS # “Alien Number”

Form I-94

Admission Number

Visa Type: J-1, F-1, H-1B, etc

Expiration Date
III | Section 2: Employer Review and Verification

1. Employee presents original document(s) to show identity and employment authorization.
2. Carefully review the document(s), then enter the document information.
   - List A OR List B + List C
3. Enter the hire date – including for re-certifications
4. Sign and Date

Common Mistakes
- List B and C documents in the wrong column
- List B and C not notated correctly
- Lisa A: providing either the I94 or Foreign Passport: must be both
- Certification not dated
III | List A Documents - **UNEXPIRED**

- **US Passport or US Passport Card**
- **Permanent Resident Card or Alien Registration Receipt Card (Form I-551)**
- **Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa (MRIV)**
- **Foreign passport with Form I-94 or Form I-94A**

**Employees with J-1 Visas (exchange visitors) and F-1 Visas (students) must provide additional documentation**

- **Employment Authorization Document (Card) that contains a photograph (Form I-766)**
- **Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A**
III | List A Documents: J-1 and F-1 Visas

List A for F-1 Visas (students)
- Unexpired Passport;
- Form I-94 or I-94A, indicating F-1 non-immigrant status; **AND**
- Form I-20, issued by Harvard, with the Designated School Official’s endorsement for employment on page 3

List A for J-1 Visas (exchange visitors)
- Unexpired Passport:
- Form I-94 or I-94A, indicating J-1 Visa non-immigrant status: **AND**
- DS-2019, issued by Harvard (*J-1 exchange visitors cannot work after the program end date on this form*)
III | List B Documents (Identity Only)

- Drivers License issued by State or outlying territory of the US
- Federal/State I.D. card
- School I.D. card
- Voters registration card
- U.S. Military card/draft record
- Military Dependent ID
- Coast Guard Merchant mariner Card
- Native American Tribal Document
- Canadian driver’s license

If Under 18:
- School record/report card
- Clinic, hospital, doctor record
- Day care or nursery school record
III | List C Documents (Employment Authorization)

- Social Security card, except for one that states that the person is not authorized to work
- Certification of Birth Abroad issued by the U.S. Department of State (Form FS-545)
- Certification of Report of Birth issued by the U.S. Department of State (Form DS-1350)
- Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal
- Native American tribal document
- U.S. Citizen ID Card (Form I-197)
- Identification Card for Use of Resident Citizen in the United States (Form I-179)
- Employment authorization document issued by DHS, for example:
  - Form I-94 issued to an asylee or work-authorized nonimmigrant (e.g., H-1B non-immigrants),
  - Unexpired Reentry Permit (Form I-327),
  - Certificate of U.S. Citizenship (Form N-560 or N-561).
### FAQ’s

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
</table>
| May I specify which documents I will accept for verification?           | **NO**  
You must accept any document (list A) or combination (list B + list C)                                                            |
| May I accept expired documents?                                         | **NO**  
**Exceptions:** Expired Employment Authorization Documents (I-766) and Permanent Resident Cards (I-551) that appear to be expired on their face but have been extended by the USCIS |
| May I accept Social Security Administration printouts that contain the employee’s name, SSN, Date or Birth, and parent’s names instead of a Social Security Card? | **NO**  
Only a person’s official Social Security card or receipt for a replacement card issued by SSA is acceptable |
| May I accept a Social Security card marked “NOT VALID FOR EMPLOYMENT” when the employee states that he or she is now authorized to work? | **NO**  
The employee must provide another document to establish his or her authorization. |
| May I accept a photocopy, fax or scan of a document presented by an employee? | **NO**  
Original documents must be included, except for a certified copy of a birth certificate. |
| Can I9 forms and supporting documentation be notarized and copies submitted | **YES**  
Original documents must be included, except for a certified copy of a birth certificate. |
III | Section 3

Section 3 is NOT Completed
• Central Payroll retains all original I-9 forms

For Recertification
• Use a new Form I-9
• Include on top of the form:
  o Update
  o HUID
  o Paygroup
• Complete Sections 1 & 2
• Send form and copies of the documentation to Central Payroll
IV | Types of Visas
IV | Who Has What Visa?

**J-1 Visa:** Specialists, scholars, government visitor, students

**H-1B Visa:** “Specialty Occupation” such as scientists, engineers

**F-1 & M-1 Visa:** Students

**TN Visa:** Residents of Canada or Mexico (part of NAFTA)

**GREEN CARD**

**Permanent Resident** (No Visa)
IV | Lawful Permanent Residents

**Who?** Someone who is lawfully admitted to the United States to live and work permanently. Also known as a *green card holder*. *I-9 is not recertified.*

**Section 1 Checkbox**
- Check the third box
- Alien / USCIS #
- Do not have to show the permanent resident card (green card) (I-551)

**Required Documents (Either/OR)**

|--------------------------|----|---------------------------------------------------------------------|
Section 1. Employee Information and Verification (To be completed and signed by employee at the time employment begins.)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Middle Initial</th>
<th>Maiden Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alan</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (Street Name and Number)</th>
<th>Apt. #</th>
<th>Date of Birth (month/day/year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>124 Mount Auburn St</td>
<td></td>
<td>07/09/1975</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Social Security #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MA</td>
<td>02138</td>
<td>123-45-6789</td>
</tr>
</tbody>
</table>

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 #) 000-000-001
- An alien authorized to work (Alien # or Admission #) until (expiration date, if applicable: month/day/year)

Employee's Signature: Alan K. Permanent
Date (month/day/year): 01/30/2012

Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature

Address (Street Name and Number, City, State, Zip Code)
Print Name

Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)

<table>
<thead>
<tr>
<th>List A</th>
<th>List B</th>
<th>List C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document title:</td>
<td>MR Driver's License</td>
<td>Social Security Card</td>
</tr>
<tr>
<td>Issuing authority:</td>
<td>Commonwealth of MA</td>
<td>SSA</td>
</tr>
<tr>
<td>Document #:</td>
<td>811122333</td>
<td>123-45-6789</td>
</tr>
<tr>
<td>Expiration Date (if any):</td>
<td>07/09/2016</td>
<td></td>
</tr>
</tbody>
</table>

CERTIFICATION: I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year): 1/20/2012, and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative: Hannah Resources
Print Name: Hannah Resources
Title: HR Generalist

Business or Organization Name and Address (Street Name and Number, City, State, Zip Code)
Harvard Medical School, 25 Shattuck St, Boston, MA 02115
Date (month/day/year): 1/20/2012
### IV | J-1 Visa – Exchange Visitors and Students

**Who?** An alien who is authorized to work for a specific program, such as government visitor, research scholar, professor, student (associate through doctoral)

#### Section 1 Checkbox
- **✓** Check the fourth box
- **✓** I-94/I-94A Admission #
- **✓** I-94/I-94A Expiration (departure, D/S) date

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 #)
- **[X]** An alien authorized to work (Alien # or Admission #) 81310663611 until (expiration date, if applicable - month/day/year) 05/09/2014

#### Required Documents (Must present ALL, under Type A)

<table>
<thead>
<tr>
<th>• Unexpired foreign passport</th>
<th>• I-94 or I-94A indicating J-1 status</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Form DS-2019 with SEVIS* number and end date of employment authorization</td>
<td>• (optional, students only) letter from official program sponsor</td>
</tr>
</tbody>
</table>

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*SEVIS = International Student & Exchange Visitor Program*
**Section 1. Employee Information and Verification** (To be completed and signed by employee at the time employment begins.)

<table>
<thead>
<tr>
<th>Print Name:</th>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
<th>Maiden Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visitors</td>
<td>Exchange</td>
<td>J</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (Street Name and Number)</th>
<th>Apt. #</th>
<th>Date of Birth (month/day/year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>124 Mount Auburn St</td>
<td>3b</td>
<td>07/09/1975</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>Zip Code</td>
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<tr>
<td>Cambridge</td>
<td>MA</td>
<td>02139</td>
</tr>
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<td></td>
<td></td>
<td>123-45-6789</td>
</tr>
</tbody>
</table>

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 #)
- An alien authorized to work (Alien # or Admission #) until (expiration date, if applicable - month/day/year) 05/09/2013

<table>
<thead>
<tr>
<th>Employee’s Signature</th>
<th>ExchangeJ. Visitors</th>
<th>Date (month/day/year)</th>
</tr>
</thead>
</table>

**Preparer and/or Translator Certification** (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

<table>
<thead>
<tr>
<th>Preparer’s/Translator’s Signature</th>
<th>Print Name</th>
<th>Address (Street Name and Number, City, State, Zip Code)</th>
<th>Date (month/day/year)</th>
</tr>
</thead>
</table>

**Section 2. Employer Review and Verification** (To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, if the document(s).)

<table>
<thead>
<tr>
<th>List A</th>
<th>OR</th>
<th>AND</th>
<th>List C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document title:</td>
<td>PPT # 12A512345</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Issuing authority:</td>
<td>Italy exp 070920</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Document #:</td>
<td>194 #12345678907</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expiration Date (if any):</td>
<td>05/09/2013</td>
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<tr>
<td>Document #:</td>
<td>DS2019 #P-1-12345</td>
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<td></td>
</tr>
<tr>
<td>Expiration Date (if any):</td>
<td>05/09/2013</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

CERTIFICATION: I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) 1/30/2012 and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

<table>
<thead>
<tr>
<th>Signature of Employer or Authorized Representative</th>
<th>Print Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hannah Resources</td>
<td>Hannah Resources</td>
<td>HR Generalist</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Business or Organization Name and Address (Street Name and Number, City, State, Zip Code)</th>
<th>Date (month/day/year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harvard Medical School, 25 Shattuck St, Boston, MA 02115</td>
<td>1/20/2012</td>
</tr>
</tbody>
</table>
**IV | F-1 Nonimmigrant Student Visa**

**F-1 Visa Holders** = foreign students pursuing academic studies

- On-campus employment
- Curricular Practical Training
- Off-Campus Employment (if affiliated with Harvard, such as a laboratory)

**Section 1 Checkbox**
- ✔ Check the fourth box
- ✔ I-94/I-94A Admission #
- ✔ I-94/I-94A Expiration (departure, D/S) date

**I-20**

**Required Documents (Present All under Type A)**

<table>
<thead>
<tr>
<th>• Unexpired foreign passport</th>
<th>• I-94 or I-94A indicating F-1 status</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Form I-20 with school’s official endorsement</td>
<td>• <strong>OPT only</strong>: EAD Card</td>
</tr>
</tbody>
</table>

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 #) ____________________

An alien authorized to work (Alien # or Admission #) 81310663611 until (expiration date, if applicable: month/day/year) 05/09/2016
### Section 1. Employee Information and Verification

<table>
<thead>
<tr>
<th>Print Name:</th>
<th>First</th>
<th>Middle Initial</th>
<th>Maiden Name</th>
</tr>
</thead>
<tbody>
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<td></td>
<td>07/09/1975</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Social Security #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MA</td>
<td></td>
<td>123-45-6789</td>
</tr>
</tbody>
</table>

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.

- [ ] A citizen of the United States
- [x] An alien authorized to work (Alien # or Admission #: 12345678901, until expiration date of applicable - month/day/year: 05/09/2012)
- [ ] A noncitizen national of the United States (see instructions)
- [ ] A lawful permanent resident (Alien #)

Employee’s Signature: [Signature]

Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer/Translator’s Signature: [Signature]

Date (month/day/year): 01/20/2012

### Section 2. Employer Review and Verification

(To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse side of this form, and record the title, number, and expiration date, if any, of the document(s)).

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<tr>
<th>List A</th>
<th>OR</th>
<th>AND</th>
<th>List C</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

- **Foreign Passport**
  - Document #: P3 # 44Z38765
  - Issuing authority: PR China
  - Document #: 194 # $11122333344
  - Expiration Date: 05/09/2013
  - Document #: I20 # $2224466688
  - Expiration Date: 05/09/2013

**CERTIFICATION**: I attest, under penalty of perjury, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) 1/30/2012, and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative: [Signature]

Print Name: Hannah Resources

Title: HR Generalist

Business or Organization Name and Address (Street Name and Number, City, State, Zip Code): Harvard Medical School, 25 Shattuck St, Boston, MA 02115

Date (month/day/year): 05/09/2012
IV | OPT (Optional Practical Training) for F-1 Visas

**What:** Provides practical experience to an F-1 student’s area of study.

**Duration:** up to 12-months of OPT upon completion of degree program. Extensions may be possible.

**Restrictions:** OPT cannot begin until USCIS has granted the application for employment authorization (Form I-766)

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**Section 1 Checkbox**

- Check the fourth box
- I-94/I-94A Admission #
- I-94/I-94A Expiration (departure, D/S) date

---

**I-766 (EAD Card)**

- Required Document
  - EAD (Employee Authorization Document) Card
### Section 1. Employee Information and Verification (To be completed and signed by employee at the time employment begins.)

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
<th>Maiden Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Imanopt</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<td>02138</td>
<td>123-45-6789</td>
</tr>
</tbody>
</table>

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 #)
- An alien authorized to work (Alien # or Admission #) 12345678901 until (expiration date, if applicable - month/day/year) 05/09/2013

**Employee’s Signature** Imanopt Student

**Date (month/day/year)** 01/20/2012

### Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

<table>
<thead>
<tr>
<th>Preparer’s/Translator’s Signature</th>
<th>Print Name</th>
</tr>
</thead>
</table>

**Address (Street Name and Number, City, State, Zip Code)**

**Date (month/day/year)**

### Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)

<table>
<thead>
<tr>
<th>List A</th>
<th>OR</th>
<th>List B</th>
<th>AND</th>
<th>List C</th>
</tr>
</thead>
</table>

**Document title** EAD

**Issuing authority** USCIS

**Document #** AAA33366999

**Expiration Date (if any):** 05/09/2013

**Document #:**

**Expiration Date (if any):**

**CERTIFICATION:** I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) 01/30/2012 and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

**Signature of Employer or Authorized Representative** Hannah Resources

**Print Name** Hannah Resources

**Title** HR Generalist

**Business or Organization Name and Address (Street Name and Number, City, State, Zip Code)**

**Harvard Medical School, 25 Shattuck St, Boston, MA 02115**

**Date (month/day/year)** 01/20/2012
IV | H-1B Visas – Specialty Occupation

Who: = foreign worker in a specialty occupation that requires theoretical or technical expertise in a certain field. Ex: scientists, engineers, computer programmers. Sponsored by Harvard University.

Extension (work with the HIO): I-129 must be filed by Harvard before the H-1B expires. The employee can still work up to 240 days while petition is being filed.

Section 1 Checkbox
✓ Check the fourth box
✓ I-94/I-94A Admission #
✓ I-94/I-94A Expiration (departure, D/S) date

I-797

Required Documents

• Unexpired foreign passport
• I-94 or I-94A indicating H-1B status
• I-797 Form - Notice of Approval
**Section 1. Employee Information and Verification** (To be completed and signed by employee at the time employment begins)

<table>
<thead>
<tr>
<th>Print Name</th>
<th>First</th>
<th>Middle Initial</th>
<th>Maiden Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnum</td>
<td>Harold</td>
<td>I</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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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 #)
- An alien authorized to work (Alien # or Admission #) 12345678901 until (expiration date, if applicable - month/day/year) 05/09/2013

Employee's Signature: **Harold I. Barnum**

Date (month/day/year): **01/20/2012**

**Preparer and/or Translator Certification** (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature: **[signature]**

Address (Street Name and Number, City, State, Zip Code): **[address]**

Print Name: **[print name]**

Date (month/day/year): **[date]**

**Section 2. Employer Review and Verification** (To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)

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<th>List B</th>
<th>AND</th>
<th>List C</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Foreign Passport</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Issuing authority: <strong>Republic of Chile</strong></td>
<td>Document #: <strong>321564987</strong></td>
<td>Expired Date (if any): <strong>05/09/2013</strong></td>
<td>Document #: <strong>I-94 12345678901</strong></td>
<td>Expired Date (if any): <strong>05/09/2013</strong></td>
</tr>
</tbody>
</table>

**CERTIFICATION:** I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) **1/30/2012**, and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

<table>
<thead>
<tr>
<th>Signature of Employer or Authorized Representative</th>
<th>Print Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hannah Resources</strong></td>
<td><strong>Hannah Resources</strong></td>
<td><strong>HR Generalist</strong></td>
</tr>
</tbody>
</table>

Business or Organization Name and Address (Street Name and Number, City, State, Zip Code):

Harvard Medical School, 25 Shattuck St, Boston, MA 02115

Date (month/day/year): **1/20/2012**
**IV | TN Visa – NAFTA Professionals**

**Who?** qualified Canadian and Mexican citizens engaging in business activities at a professional level.

**Section 1 Checkbox**
- ✓ Check the fourth box
- ✓ I-94/I-94A Admission #
- ✓ I-94/I-94A Expiration (departure, D/S) date

```
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 #) ____________
☒ An alien authorized to work (Alien # or Admission #) 81310663614
  until (expiration date, if applicable - month/day/year) 05/09/2016
```

**Required Documents**

<table>
<thead>
<tr>
<th>Canada and Mexico, List A</th>
<th>OR</th>
<th>Alternate: Canada Only, List B</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Unexpired foreign passport</td>
<td></td>
<td>• Canadian Driver’s License</td>
</tr>
<tr>
<td>• I-94 / I-94A indicating TN nonimmigrant status</td>
<td></td>
<td>• Unexpired employment authorization document issued by DHS (Dept. Homeland Security) – ex, I-766</td>
</tr>
</tbody>
</table>

[Image of a passport with the date 05/09/2016]
### Section 1. Employee Information and Verification

<table>
<thead>
<tr>
<th>Name</th>
<th>First</th>
<th>Middle Initial</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Nunez</td>
<td>Teresa</td>
<td></td>
<td>Romero</td>
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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.

- [x] An alien authorized to work (Alien # or Admission #) 12345678901 until (expiration date, if applicable - month/day/year) 05/08/2013

Employee’s Signature: Teresa Nunez  
Date (month/day/year): 01/20/2012

### Preparer and/or Translator Certification

(To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer/Translator’s Signature:  
Print Name:  
Address (Street Name and Number, City, State, Zip Code):  
Date (month/day/year):  

### Section 2. Employer Review and Verification

(To be completed and signed by employer. Examine one document from List A or examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)

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<td></td>
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</tbody>
</table>

Issuing authority: Mexico  
Document #: ABC-11235  
Expiration Date (if any): 07/09/2016

<table>
<thead>
<tr>
<th>Document #</th>
<th>Expiration Date (if any)</th>
</tr>
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<tbody>
<tr>
<td>I-94</td>
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CERTIFICATION: I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) 1/30/2012 and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

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Title: HR Generalist  

Business or Organization Name and Address (Street Name and Number, City, State, Zip Code): Harvard Medical School, 25 Shattuck St, Boston, MA 02115  
Date (month/day/year): 1/20/2012
V | For More Info...
Find the links to several helpful websites in Eureka: (http://eureka.harvard.edu)

- USCIS I-9 Central
- Student and Exchange Visitor Program (SEVP)
- Handbook for Employees: Instructions for Completing Form I-9
- Harvard International Office/Immigration

Central Payroll Contact Information:

ufs_crt@harvard.edu
617-495-8500, option 4
Questions??????