Remote Hire Form I-9 Instructions for Authorized Representatives

A Hiring Department at the University of New Hampshire (UNH) asks that you act as our Authorized Representative in completing the Form I-9 Employment Eligibility Verification. According to the U.S. Citizenship and Immigration Services (USCIS), UNH must verify that each person offered employment is eligible to work in the United States. It is our request that you serve as our representative (and not a notary) by examining the identity and eligibility documentation presented by our new hire and completing Section 2 of the Form I-9.

**Authorized representatives** – Please print the following:

Your Name

Address

Phone

Email

Section 1 must be filled out by the employee no later than the first day of employment, but not before accepting a job offer. Section 2 must be completed by you within three business days of the employee’s first day of employment. UNH participates in the E-Verify system which confirms the employee’s employment eligibility data with the Department of Homeland Security and Social Security Administration. Therefore, the social security number must be included on Section 1.

The employee must present documentation as identified on the “Lists of Acceptable Documents” (the last page) of the Form I-9. Documents must be original and unexpired. The employee can present either one document from List A or one document from List B and one document from List C.

Please complete the following steps in order and initial that you have done so:

___ Verify that Section 1 is completed by the employee correctly.
___ Examine the presented original documents and attach a copy to the Form I-9.
___ Complete Section 2. Please ensure the following are completed:
   ___ The “Citizenship/Immigration Status” field is asking for the number of the checkbox checked off on Section 1.
   ___ Fill in the employee’s first day of employment, per the hiring department.
   ___ Sign, date, and print your name. Do not stamp the form.
___ The remainder of the certification section should look like the following:

<table>
<thead>
<tr>
<th>Signature of Employer or Authorized Representative</th>
<th>Today’s Date (mm/dd/yyyy)</th>
<th>Title of Employer or Authorized Representative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Name of Employer or Authorized Representative</td>
<td>First Name of Employer or Authorized Representative</td>
<td>Employer’s Business or Organization Name</td>
</tr>
<tr>
<td>Employer’s Business or Organization Address (Street Number and Name)</td>
<td>City or Town</td>
<td>State</td>
</tr>
</tbody>
</table>

Please return this page and the copies of the documents you verified alongside Sections 1 and 2 (Pages 1 and 2) of the Form I-9 to the below address. Thank you for your assistance.

University of New Hampshire
Human Resources
2 Leavitt Lane
Durham, NH 03824