How to Fill Section 2 of I-9

STEP 1:-

Search by Last Name 🔍   + QUICK INVITE

QUICK LINKS

- 📋 Manage I-9 Forms ›
- 👤 Remote Agent ›
- ✔ Admin Tools ›
- 📊 Reports ›
- ⚙ Settings ›
- ⑦ Help ›

Summary & Alert	Add a new I-9 via Email or SMS	Rehires/Re-Verifications
Complete Section 2	View All I-9s	Reports

Click on Summary & Alerts

STEP 2:-

Click on the "View" checkmark under Section 2 Pending Section.

STEP 3:-

← CANCEL   🔍 Review I-9 Forms

Users	All Users ▼	Location	--Select Location-- ▼
Employee ID		SSN (Last 4 digits)	XXX | XX |
First Name		Last Name	
Hire Date (From - To)	MM/DD/YYYY 📅 MM/DD/YYYY 📅		

SEARCH

Enter an employee record that you want to review and click on "Search". `1`

239 Records Found
The results are fetched based on the search criteria

☰ Filter Grid

I-9 #	First Name	Last Name	SSN	Department	Worksite Location	Citizenship	Invited By	Invited On	Hire Date	Submitted On	Status	Review	Actions
I9-11641	Anderson	Kerry	XXX-XX-3366			Citizen of US	Sruthi Frnaics			11/13/2020	Not Reviewed	✓	☰
I9-11641	Anderson	Kerry	XXX-XX-3366			Citizen of US					Not Reviewed	✓	☰
I9-11641	Anderson	Kerry	XXX-XX-3366			Citizen of US				/2020	Not Reviewed	✓	☰
I9-11641	Anderson	Kerry	XXX-XX-3366			Citizen of US	Jobin GeorgeTest			11/13/2020	Not Reviewed	✓	☰
I9-11641	Anderson	Kerry	XXX-XX-3366			Citizen of US	Emily Mathew			11/13/2020	Not Reviewed	✓	☰
I9-			XXX-XX-			Citizen of	Sruthi				Not		

`2` **Click on the Checkmark that's under "Review" to edit Section 2 of that employee.**

STEP 4:-

← CANCEL   👁 Review I-9 Form Details   + ADD NOTES   👥 HELP

💡 Details of the I-9 Form selected for review and approval is given below. You need to review the Section 1 details and complete the section 2 details before the I-9 Form is completed.

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.)

Last Name (Family Name) * ❓	First Name (Given Name) * ❓	Middle Initial ❓	Other Last Names Used (if any) ❓
Kerry	Anderson	N/A	N/A

Address (Street Number and Name) * ❓	Apt. Number ❓	City or Town * ❓	State * ❓	Zip Code * ❓
4271 Walt Nuzum Farm Road	N/A	Uoo	Hawaii	14424

Date Of Birth (mm/dd/yyyy) * ❓	U.S. Social Security Number * ❓	Employee's Email Address ❓	Employee's Telephone Number ❓
12/10/1972 📅	555 53 3366	N/A	N/A

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 boxes):

- 🔘 A citizen of the United States   ❓
- ⚪ A noncitizen national of the United States   ❓
- ⚪ A lawful permanent resident(Alien Registration Number/USCIS Number)   ❓
- ⚪ An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy)   ❓

> **Click here if you want to edit out any details in Section 1.**

✏ EDIT SECTION 1

☐ Waiting on Social Security Number from SSA

✏ EDIT SECTION 1

☐ Waiting on Social Security Number from SSA

Uploaded Documents

Doc Type	File Name	Delete
U.S. Passport (Front Page)	FrontPage.pdf	🗑
U.S. Passport (Back Page)	BackPage.pdf	🗑

Upload Supporting Documents

| -------A------ ▼ |

Select Document

| | Select |

UPLOAD

Section 2. Employer or Authorized Representative Review and Verification

(Employers 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.")

Document Type   ⦿ List A   ◯ List B And List C

Employee submitted receipt for List A ❓   ☐ Employee submitted receipt

Document Title ❓ | U.S. Passport   ▼ | ❓

Issuing Authority ❓ | U.S Department of State |

Document Number ❓ | 57S2139H01 |

Expiration Date (if any)(mm/dd/yyyy) ❓ | 05/05/2022   📅 |

Document Title ❓ | ▼ |

Issuing Authority ❓ | ----Select Issuing Authority---- |

Document Number ❓ | |

❓

> **Depending upon the document selected, enter the corresponding document number and its expiry date.**

Document Number ❓

Expiration Date (if any)(mm/dd/yyyy) ❓   MM/DD/YYYY 📅

Additional Information : ❓

> **Enter any information here (optional)**

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) ❓   MM/DD/YYYY 📅 *(See instructions for exemptions)*

> **Enter the first day of employment of the candidate.**

Signature Of Employer Or Authorized Representative ❓

Today's Date (mm/dd/yyyy) * ❓   02/03/2021 📅

Title of Employer or Authorized Representative * ❓   Technical Content Writer

Last Name of the Employer or Authorized Representative ❓   Mathew

First Name of Employer or Authorized Representative ❓   Zachariah

Employer's Business or Organization Name ❓   emp solutions

Worksite Location   001 - Atlantic ▼

Employer's Business or Organization Address (Street Number and Name) ❓   4461 Kuhl Avenue

City or Town ❓   Georgia

State ❓   Indiana ▼

Zip Code ❓   10245

> **Click on "Complete & Continue" to**

COMPLETE AND CONTINUE   BACK

STEP 5:-

← CANCEL   ✏ Electronic Signature

I-9-Electronic Signing

I attest, under penalty, 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 02/08/2021 and that to the best of my knowledge the employee is eligible to work in the United States. I attest to the following:

- I understand the employee's work authorization will be verified electronically with the United States government.
- I authorize my section 2 electronic signature to be automatically applied to the documents provided to the employee should the employee contest/not contest the verification results.
- I am not using government verifications for prescreening purposes or discriminating against any employee who receives a tentative nonconfirmation response

☐ I have read and agree with the certification statement above.

Enter Initial

[   ]

[E-SIGN AND CONTINUE]   [BACK]   [CANCEL]

Click on the Checkbox and enter your initials in the box provided.

1

After putting your initials, click on "E-Sign & Continue" to electronically sign the review process & the I-9 form.

2

STEP 6:-

← CANCEL   ✓ I-9 Form Completion

💡 You have successfully completed the I9 Form for the following employee. Please confirm the employee details. You can generate and view the I-9 form by clicking on the Generate I-9 Form below.

I-9 Details

I-9 Code	: I9-11641	Date Of Hire	: 02/08/2021
First Name	: Anderson	Last Name	: Kerry
Maiden Name	:	Date Of Birth	: 12/10/1972
Address	: 4271 Walt Nuzum Farm Road	Social Security #	: XXX-XX-3366
Citizen Type	: A citizen of the United States		

Review Documents

GENERATE I-9 FORM   ⟶   **Click here, to generate and view the entire I-9 for this employee.**

ADD DOCUMENTS   BACK TO I-9 HOME   ⟶   **Click here, to go back to I-9 main interface.**