

How to Fill Section 2 of I-9 in Workday



Step 1:

The I-9 is automatically triggered in WD as part of the hire process. Once the new hire completes 'Section 1' of the I-9, the I-9 ambassador will be notified of an outstanding task to complete 'Section 2.'

Let's Get Started

Awaiting Your Action



Complete Form I-9: [REDACTED]

My Tasks - 28 minute(s) ago

DUE 04/20/2024

A yellow button with rounded corners and a small icon on the left, containing the text "Go to My Tasks (8)".

Click "Go to My
Tasks"

Step 2:

When the new hire comes to your office with the original documents required to verify the I-9, click on the task for that new hire and complete 'Section 2.'

All Items

8 items



 [Advanced Search](#)

Complete Form I-9: [REDACTED] 04/19/2024 ☆

Due: 04/20/2024

Effective: 04/22/2024

Your screen will look like this:

The screenshot displays a web application interface for reviewing Form I-9. On the left, a sidebar contains 'My Tasks' and 'All Items' sections. The 'All Items' section shows a list of items, including 'Complete Form I-9' with a due date of 04/19/2024 and an effective date of 04/22/2024. The main content area is titled 'Review Form I-9' and includes a search bar, a note about document requirements, and a 'Section 1. Employee Information and Attestation' form. The form fields are as follows:

- Last Name (Family Name): [Redacted]
- First Name (Given Name): [Redacted]
- Middle Initial (if any): N/A
- Other Last Names Used (if any): N/A
- Address (Street Number and Name): [Redacted]
- Apt. Number (if any): N/A
- City or Town: [Redacted]
- State: [Redacted]
- ZIP Code: [Redacted]
- Date of Birth (mm/dd/yyyy): [Redacted]
- U.S. Social Security Number: [Redacted]
- Employee's Email Address: [Redacted]
- Employee's Telephone Number: [Redacted]

At the bottom of the form, there are four radio button options for attestation:

1. A citizen of the United States
2. A permanent resident of the United States (See instructions)
3. A lawful permanent resident (Born outside the United States)
4. A temporary (other than temporary E, and E-2, visas) authorized to work (self, spouse, if any)

At the bottom of the page, there are four buttons: 'Approve', 'Send Back', 'Save for Later', and 'Cancel'. A 'W' logo is visible in the bottom right corner.

Based on the document presented, compare and confirm that the employee has completed 'Section 1' accurately.

Step 3:

Check to see if the new hire filled out "Section 1" correctly

Review Form I-9 [redacted] ...

When using E-Verify, any document presented for Type B must have a photograph that matches the employee.

Note Review this form for completeness before submitting. When this Form I-9 is printed, any fields left blank will be populated with N/A indicating the field is not applicable.

Employment Eligibility Verification

Department of Homeland Security, U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047
Expires 07/31/2026

>START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the Instructions.

Form I-9 Instructions

ANTI-DISCRIMINATION NOTICE: All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in Section 1, or specify which acceptable documentation employees must present for Section 2 or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

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) * [redacted] First Name (Given Name) * [redacted] Middle Initial (If any) [redacted] U.S. Other Last Name(s) Used (If any) [redacted] U.S.

Address (Street Number and Name) * [redacted] Apt. Number (If any) [redacted] N/A City or Town * [redacted] State * [redacted] ZIP Code * [redacted]

Date of Birth (mm/dd/yyyy) * [redacted] U.S. Social Security Number [redacted] Employer's Email Address [redacted] Employer's Telephone Number [redacted]

Check one of the following boxes to attest to your citizenship or immigration status (See page 2 and 3 of the instructions.)

- 1. A citizen of the United States
- 2. A non-citizen national of the United States (See instructions.)
- 3. A lawful permanent resident (Enter USCIS or A-Number.)
- 4. A noncitizen (other than from numbers 2 and 3, above) authorized to work in the U.S. (e.g., visa, permit.)

If you check item number 4, enter one of these:

USCIS A-Number

OR

Form I-94 Admission Number

OR

Foreign Passport Number and Country of Issuance

Country of Issuance (among)

Signature of Employee

I am aware that federal law provides for imprisonment and/or fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or immigration status, is true and correct.

By checking the I Agree check box, I acknowledge that I have read the attestation statement above and am electronically signing this Form I-9.

I Agree * Today's Date (mm/dd/yyyy) 04/19/2024

Step 4:

Fill out List A **OR** List B & C with the documentation the new hire handed to you

Section 2. Employer Review and Verification:

Employers or their authorized representative must complete and sign Section 2 within three business days after the employee's first day of employment, and must physically examine, or examine consistent with an alternative procedure authorized by the Secretary of DHS, documentation from List A OR a combination of documentation from List B and List C. Enter any additional documentation in the Additional Information box, see Instructions.

List A

Document Title 1

Document presented is a receipt

Select Issuing Authority

Document Number (if any)

Expiration Date (if any)

Document Title 2 (if any)

Select Issuing Authority

Document Number (if any)

Expiration Date (if any)

Document Title 3 (if any)

Document presented is a receipt

Select Issuing Authority

Document Number (if any)

Expiration Date (if any)

List B

Document Title 1

Document presented is a receipt

Select Issuing Authority

Enter Issuing Authority

None of the above

Document Number (if any)

Expiration Date (if any)

AND

List C

Document Title 1

Document presented is a receipt

Select Issuing Authority

Enter Issuing Authority

None of the above

Document Number (if any)

Expiration Date (if any)

Additional Information

Check here if you used an alternative procedure authorized by DHS to examine documents.


Reminder:
One Document from List A
OR
One Document from each List B & C

See required documentation here:
<https://www.uscis.gov/i-9-central/form-i-9-acceptable-documents>

Drop down menu example & options:

List A

Document Title 1



 
 U.S. Passport or U.S. Passport Card

Document presented is a receipt

AND

List B

Document Title 1

 
 U.S. Driver's License
 U.S. State ID Card
 School ID Card with photograph 
 Voter Registration Card
 Government Agency ID Card
 U.S. Military Dependent's ID Card
 U.S. Military Card or Draft Record
 U.S. Coast Guard Merchant Mariner Card
 Canadian Driver's License
 Native American Tribal Document (List B)
 Day-care or Nursery School Record (under age 18)
 Clinic, Doctor, or Hospital Record

Document presented is a receipt

Document Number (if any)

Expiration Date (if any)

AND

List C

Document Title 1

List B

Document Title 1


 

Document presented is a receipt

Select Issuing Authority

Enter Issuing Authority

None of the above

 
Countries >
Form I-9 Authority >
Canadian Provinces >
Country Regions >
By Location >

Document Number (if any)

Expiration Date (if any)

AND

Step 5:

Click the "I Agree" box and Fill out your information (if not populated already)

Signature of Employer or Authorized Representative

By checking the I Agree check box, I acknowledge that I have read the attestation statement above and am electronically signing this Form I-9.

I Agree Title of Employer or Authorized Representative * [REDACTED]

Last Name of Employer or Authorized Representative * [REDACTED] First Name of Employer or Authorized Representative * [REDACTED]

Employer's Business or Organization Name * The William Paterson University of New Je

Employer's Business or Organization Address (Street Number and Name) * 300 Pompton Road City or Town * Wayne

State * NJ ZIP Code * 07470

For reverification or rehire, complete Supplement B, Reverification and Rehire on Page 4.

[Supplement B, Reverification and Rehire](#)

Overdue Reason (empty)

Overdue Reason Other

This completes 'Section 2' of the I-9. It is then sent to HR for final approval.