

FORM I-9 SUBMISSION INSTRUCTIONS FOR REMOTE STUDENT EMPLOYEES

Step 1: Review the Form I-9 and Instructions found in the employment packet at:
<https://case.edu/financialaid/student-employment/student-employment-forms>

- Complete Section 1.
- Print & Sign Section 1.

Step 2: Gather ORIGINAL documents from the Form I-9 Acceptable Document List. Provide one of the following acceptable combinations. ATTENTION: Faxes, scans, photocopies, etc. are NOT ALLOWED UNDER ANY CIRCUMSTANCES.

Acceptable Combination #1:

OR

Acceptable Combination #2:

One document from List A

1 document from List B PLUS 1 document from List C

Step 3: An Authorized Representative must complete Section 2 and review your original documents. We are instructing new student hires to locate a competent individual (age 18 or older) who can complete Section 2 of your Form I-9 in your presence.

Find a Designated Authorized Representative

Employers may designate an authorized representative to complete Section 2 of the Form I-9. An authorized representative may complete and sign the form when the employer is not physically present.

Who can act as a designated Authorized Representative?

Any of the following who is competent & age 18 or older:

1. Services that will complete Form I-9 Section 2: Public Library, Bank, or Notary Service in a FedEx or UPS Store
2. Neighbor
3. Friend
4. Family Member (should be last resort)

DO NOT have the form notarized.

Simply ask the individual to follow the Instructions for Authorized Representative and complete the Representative's Statement on the following pages.

👉 PERSONALLY GIVE THE AUTHORIZED REPRESENTATIVE 👈

1. Form I-9 with Section 1 complete
2. Your ORIGINAL documents
3. Instructions for Authorized Representative, completed with your name, date of birth and start date
4. Representative's Statement

You must be physically present with valid, original work authorization documents for review.

Step 4: If possible, once the Form I-9 is complete, scan and email a copy to the Office of Student Employment at stu-emp@case.edu.

Step 5: Immediately mail the completed Employment Packet, including: your original signed Form I-9, copies of your Form I-9 Section 2 identification documents, and signed Representative's Statement to:

Case Western Reserve University
Office of Student Employment
10900 Euclid Avenue
Yost Hall 412
Cleveland, Ohio 44106-7049

IMPORTANT: Contact stu-emp@case.edu with any questions. This is time sensitive and must be done accurately. Incomplete forms will be returned to you and will delay the process.

Instructions For Authorized Representative

To the Acting Authorized Representative:

Please allow us to express our gratitude for your willingness to help our student employee and Case Western Reserve University with this process during this emergency pandemic. Case Western Reserve University has hired the following individual as a Student Employee:

Full Name: _____

Date of Birth: _____

Start Date: _____

[Write this date in Section 2 of the Form I-9 Certification as the “first day of employment”]

As a remote hire, this student employee will not be physically present at our office to complete the Form I-9. As such, we request that you act as our authorized representative for the sole purpose of completing the Form I-9, Employment Eligibility Verification, which is permitted under Department of Homeland Security rules. As an acting representative, you are attesting to viewing the actual identification documents presented by the student which confirm proof of identity and eligibility to work in the U.S.

We are available to assist you with this process via phone. **Please call 216-368-4533 for support between 8:30 a.m. and 5:00 pm. ET Monday-Friday.** Please review the instructions below before calling, even though we are happy to talk you through the process over the phone. This document provides step-by-step instructions for completing the Form I-9 verification. Please review the list of acceptable documents and ensure the student has proper documentation. If the student does not have proper documentation, you cannot complete this process.

The employee should provide the Form I-9 Instructions, their original Form I-9, and the List of Acceptable Documents for you to use for this purpose. These can also be found at: <https://www.uscis.gov/i-9> or at <https://case.edu/financialaid/student-employment/student-employment-forms>. You can also refer to the current edition of the DHS I-9 Handbook for Employers, Form M-274 found at <http://www.uscis.gov/sites/default/files/files/form/m-274.pdf>.

STEP-BY-STEP INSTRUCTIONS FOR AUTHORIZED REPRESENTATIVE

Step One: Call the Office	<p>Before you begin, call the Office of Student Employment at (216) 368-4533 between 8:30 a.m. and 5:00 p.m. ET</p>																		
Step Two: Form I-9, Section 1	<p>Verify that the student employee has completed Section 1 of the Form I-9 in full.</p>																		
Step Three: Documents	<p>You must accept any document(s) presented which <i>reasonably</i> appears on its face to be genuine and to relate to the person presenting it.</p> <p>The employee must present you with documents as identified on the List of Acceptable Documents. You may not specify which document(s) must be presented, although you may help the employee review the list.</p> <p>Please note that <u>original</u> documents are required; photocopies are <u>unacceptable</u>. The employee can present either:</p> <ul style="list-style-type: none"> ○ Any <u>one</u> document from List A, or ○ <u>Two</u> documents, one from List B and one from List C. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="text-align: center; border-bottom: 1px solid black; width: 33%;">List A</td> <td style="text-align: center; border-bottom: 1px solid black; width: 10%;">OR</td> <td style="text-align: center; border-bottom: 1px solid black; width: 33%;">List B</td> <td style="text-align: center; border-bottom: 1px solid black; width: 10%;">AND</td> <td style="text-align: center; border-bottom: 1px solid black; width: 14%;">List C</td> </tr> <tr> <td style="text-align: center; font-size: small;">Identity and Employment Authorization</td> <td></td> <td style="text-align: center; font-size: small;">Identity</td> <td></td> <td style="text-align: center; font-size: small;">Employment Authorization</td> </tr> </table> <p style="text-align: center; color: red; font-weight: bold; margin-top: 10px;">Record List A documents under Column A; List B & C under Columns B & C in Section 2.</p>	List A	OR	List B	AND	List C	Identity and Employment Authorization		Identity		Employment Authorization								
List A	OR	List B	AND	List C															
Identity and Employment Authorization		Identity		Employment Authorization															
Step Four: Complete Form I-9, Section 2	<p>Complete Section 2 on page 2 of the Form I-9, including the certification block, in full.</p> <ul style="list-style-type: none"> ● Write employee name at top of page 2 ● In the “Citizenship/Immigration Status” box, write the number that corresponds to boxes 1-4 on page 1 (US Citizen=1; Lawful Permanent Resident=3, etc.) ● In the “Additional Information” box, write “Completed during COVID-19 National Emergency” ● Insert the employment start date listed above <p style="margin-left: 20px;">The employee's first day of employment (mm/dd/yyyy): <input style="border: 1px solid red; width: 150px; height: 20px;" type="text"/></p> <ul style="list-style-type: none"> ● Sign your name, enter today’s date and write the following: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 33%; font-size: small;">Signature of Employer or Authorized Representative</td> <td style="width: 33%; font-size: small;">Today's Date (mm/dd/yyyy)</td> <td style="width: 33%; font-size: small;">Title of Employer or Authorized Representative</td> </tr> <tr> <td style="color: red;">X (please sign here)</td> <td style="color: red;">(today's date here)</td> <td></td> </tr> <tr> <td style="font-size: small;">Last Name of Employer or Authorized Representative</td> <td style="font-size: small;">First Name of Employer or Authorized Representative</td> <td style="font-size: small;">Employer's Business or Organization Name</td> </tr> <tr> <td style="color: red;">Your Last Name</td> <td style="color: red;">Your First Name</td> <td style="color: red;">Case Western Reserve University</td> </tr> <tr> <td style="font-size: small;">Employer's Business or Organization Address (Street Number and Name)</td> <td style="font-size: small;">City or Town</td> <td style="font-size: small;">State ZIP Code</td> </tr> <tr> <td style="color: red;">10900 Euclid Avenue</td> <td style="color: red;">Cleveland</td> <td style="color: red;">OH 44106</td> </tr> </table> <p style="text-align: center; color: red; font-weight: bold; margin-top: 10px;"><i>Do not complete Section 3 unless we have directed you to.</i></p>	Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	Title of Employer or Authorized Representative	X (please sign here)	(today's date here)		Last Name of Employer or Authorized Representative	First Name of Employer or Authorized Representative	Employer's Business or Organization Name	Your Last Name	Your First Name	Case Western Reserve University	Employer's Business or Organization Address (Street Number and Name)	City or Town	State ZIP Code	10900 Euclid Avenue	Cleveland	OH 44106
Signature of Employer or Authorized Representative	Today's Date (mm/dd/yyyy)	Title of Employer or Authorized Representative																	
X (please sign here)	(today's date here)																		
Last Name of Employer or Authorized Representative	First Name of Employer or Authorized Representative	Employer's Business or Organization Name																	
Your Last Name	Your First Name	Case Western Reserve University																	
Employer's Business or Organization Address (Street Number and Name)	City or Town	State ZIP Code																	
10900 Euclid Avenue	Cleveland	OH 44106																	
Step Five: Return Documents to Employee	<p>Once completed, return these items to the employee:</p> <ul style="list-style-type: none"> ● Fully completed Form I-9 ● Original document(s) presented for Form I-9, Section 2 ● Signed Representative’s Statement (attached – next page) 																		

REPRESENTATIVE'S STATEMENT

I have agreed to act as Case Western Reserve University's representative for the **sole purpose** of completing the Form I-9 for the above-identified, newly hired CWRU student employee. I have completed Section 2 of the enclosed Form I-9 on behalf of Case Western Reserve University. I attest that I am at least 18 years of age and have examined the actual original documents identified in Section 2 of the Form I-9 and that the documents appeared to relate to the employee and appeared genuine on their face to me.

Signature: _____ Date: _____

Your Full Name: _____

Title and Employer (*if applicable*): _____

Address: _____

Telephone Number: _____

Checklist for Students

Before You Send Your Documents to CWRU

CHECK 1	Did you complete Form I-9, Section 1, fully? Are all blocks completed and the signature date is correct?	
CHECK 2	Did you present ORIGINAL documents from the List of Acceptable Documents to the reviewer for Section 2 of the Form I-9?	
CHECK 3	Did the authorized representative write correct information on each line under List A <u>or</u> List B & List C?	
CHECK 4	Did the authorized representative sign and date section 2 of the Form I-9? If possible, did you email a scanned copy of the Form I-9 to stu-emp@case.edu ?	
CHECK 5	Did the authorized representative sign the Representative's Statement?	
CHECK 6	Did you make copies of your documents and attach the appropriate copies to the Form I-9?	
CHECK 7	No later than three days from your hire date , mail all pages of the original Form I-9, copies of your documents and the Representative's Statement to: Case Western Reserve University Office of Student Employment 10900 Euclid Avenue, Yost Hall 412 Cleveland, Ohio 44106-7049	

Enclose the following to the Office of Student Employment:

1. Original signed Form I-9
2. Photocopy of your original document(s)
3. Signed Representative's Statement