

HireRight: Step-by-Step Guide

Reverifying Employment Authorization (Section 3 of the Form I-9)

An Employment Eligibility Verification Form I-9 may need to be reverified in the following situations:

- An employee who has a name change.
- An employee's work authorization documentation has expired and requires updating.
- An employee is rehired within three years of when the Form I-9 was originally completed.
- **Note:** If the Form I-9 was not initially completed electronically, the paper form may be scanned to an image file and uploaded to the HireRight system. Once complete, you can perform an electronic reverification as described below.

To reverify an employee's employment authorization:

- 1. Find the employee whose Form I-9 needs to be reverified.
- Right-click the employee and choose Re-verify I-9 Form.
 Or, select the employee and then choose Re-verify I-9 Form from the More Options menu on the toolbar.

| New Print | Additiona | al Columns * | More Options View |
|---------------------------|------------------|--------------|---------------------------------|
| | , ng Employer | | E-VeSend Form te E-Verify Tent. |
| E-Verify Status | -14 | First Name | Start/Termination Dates |
| Employment Authorized | | Diane | E-Verify Reporterspahn |
| Employment Authorized | | Joel | Manage Supporting Docs |
| Employment Authorized | | Lara | Reassign Ackerman |
| Employment Authorized | | Christopher | Re-verify I-9 Form |
| Employment Authorized | | Joshua | Correct I-9 Form |
| Employment Authorized | | Alexander | Delete I-9 form |
| Employment Authorized | | Масу | Flag Funk 🕨 |
| SSA Employment Authorized | I I | Nina | |
| Employment Authorized | | Derek | |
| SSA Employment Authorized | I I | Sharon | |
| Employment Authorized | | Stacy | |

The Updating and Reverification screen is displayed.

Note: Some accounts display an option box at this time, asking whether you want to send the form to a hiring manager or complete the form yourself. This is a custom feature, so not all users will see this box display. After you make your selection, you can continue as described in the remaining steps.

HCM Step-by-Step Guide | hcm_sbs-HireRight-Reverify-Employment-Authorization.docx
 Revised: June 24, 2020 | Prepared by: Employee Services | Training Feedback: system.training@cu.edu

3. Under Purpose of Reverification, select the reason for reverifying the Form I-9.

| ELIGIBILITY VERIFICATION Directions | | 3 - Reverification and Rehires Wo marked with an * are required | orksheet |
|--|---------|--|---------------------------|
| Updating and Reverification Worksheet | | | |
| Section 3 Review and E-Sign | | | |
| | To be | completed and signed by employer or | authorized representative |
| | Purpose | e of Reverification | |
| Form I-9 Instructions | | Employee Name Change | 1 |
| | | Employee Rehire | |
| List of Acceptable Documents | | Employee Work Authorization renound | |
| List of Acceptable Documents | | Employee Work Authorization renewal | 1 |
| | | Employee work Authorization renewal | J |

4. Enter updated information.

5. Select the l attest... box.

_

6. Click Proceed to Form I-9 Completion.

| Employee's New Name | | |
|--|---|--|
| Last Name: | | |
| First Name: | | |
| Middle Initial: | | |
| Date of rehire | | |
| Date of rehire: | 1 | |
| Document | | |
| List A | | List C |
| document that establishes current | employment eligi | as expired, provide the information below for the bility. lacement of a lost, stolen, or damaged document. |
| Document Title: * | Click here to sel | ect Document Title |
| Document #: * | | <u>~</u> |
| Expiration Date (if any): *🥝 | mm / dd | / уууу |
| The employee has a Student of documented for their Form I-9. | r Academic Visa a | nd has additional information that needs to be |
| in the United States, and if th | e employee pres elate to the individ | of my knowledge this employee is authorized to work ented document(s), the document(s) I have examined lual. I certify that the information entered above can be |
| P | roceed to Form I | -9 Completion |

- 7. Fill out the section, Complete and Electronically Sign Form I-9, Section 3.
- 8. Provide the name of the authorized representative signing the form.
- 9. Read and select each of the certification boxes.

| Section 3. Reverifica | tion and Re | hires (To be co | mpleted a | ind sign | ed by employer or authorized |
|---|--|--|--|-------------------------------|---|
| A. New Name ((f applicable) | | | | | B. Date of Rehire ((f applicable) |
| Last Name (Family Name) | First Name | (Given Name) | Middl | le Initial | Date (non/dd/3035) 05/01/2017 |
| C. If the employee's previous gra hat establishes continuing emplo | nt of employment a | uthorization has exp | ired, provid | le the in | formation for the document or receip |
| Document Title | | Document Numbe | | _ | Expiration Date ((f arg)/mm/dd35 |
| nited States, and if the emp enuine and to relate to the i | loyee presented ndividual. | document(s), the | docume | nt(s)11 | yee is authorized to work in the have examined appear to be |
| signature of Employer or Author | ized Representative | Today's Date (mm | iddjoggol N | ame of | Employer or Authorized Representat |
| Electronic Signature of E | mployer or Au | uthorized Repre | sentative | e | |
| First Name: * | | | | | 1 |
| Last Name: | | | | | |
| E-mail Address: | | | | | |
| 0 | | | | | |
| | | | | | |
| Clear | | | | | |
| CERTIFICATION - I atte authorized to work in the examined appear to be | United States, a genuine and to re | and if the employe state to the individ | e presente ual. * | ed docs | ty knowledge, this employee is iment(s), the document(s) i have |
| CERTIFICATION - I attended to work in the examined appear to be a certify that the informat Reverification Workshee | United States, a genuine and to re ion that appears d | and if the employe slate to the individ above on the For | e presente ual. • m I-9 is ex | ed docu | iment(s), the document(s) I have s I entered it in the Updating and |
| CERTIFICATION - I atte suthorized to work in the examined appear to be certify that the informat Reverification Workshee | United States, a genuine and to re ion that appears d | and if the employe slate to the individ above on the For | e presente ual. • m I-9 is ex | ed docu | ment(s), the document(s) I have |
| CERTIFICATION - I attended authorized to work in the authorized to work in the examined appear to be certify that the informat Reverification Workshee understand that I am ur electronically * | e United States, a genuine and to re ion that appears it " sing electronic m ng my informatio providing this int | and if the employe elate to the individ above on the Fon eans to sign this o n above, I am cer | e presente ual. • m I-9 is ex locument, tifying that | ed docu actly a and I c | iment(s), the document(s) I have s I entered it in the Updating and |
| CERTIFICATION - I attended authorized to work in the summed appear to be of certify that the informat Reverification Workshee understand that I am us sectronically * understand that by typi | e United States, a genuine and to re ion that appears it " sing electronic m ng my informatio providing this int | and if the employe elate to the individ above on the Fon eans to sign this o n above, I am cer | e presente ual. • m I-9 is ex locument, tifying that | ed docu actly a and I c | ment(s), the document(s) I have a I entered it in the Updating and consent to signing this document be person identified by this |

10. Click E-Sign & Save.