

HUMAN RESOURCES - RECORDS

Procedures for New Hire - How to Complete Section 1 of I-9 Form

New Hire will receive an email from Equifax which will contain a link to the Employment Center (see example below). If new hire cannot find e-mail in Inbox folder then receiving system may have routed e-mail to Clutter/Junk/Spam folder. New hire may check Clutter/Junk/Spam folder for e-mail from Equifax too.

E-mail Example

From: donotreply@equifax.com <donotreply@equifax.com> Sent: Thursday, June 6, 2019 10:05 AM To: Julia Johnson Subject: Welcome to the University of Nebraska (UNMC)

Dear Julia,

Welcome to the **University of Nebraska Medical Center**! Congratulations on your new position and best wishes as you launch your career with us.

To ensure your career gets off to a great start, you must complete your Form I-9, which may be accessed at the <u>Employment Center</u> or by copying and pasting the following URL into your browser: <u>https://hrx.talx.com/webmanager/LoginClientKey</u>

Please configure your web browser to allow Pop-ups for this site. You may need to turn your Pop-up Blocker off.

Use the following Login ID and Password for authentication:

Login ID: XXXXXXXX

Password: Your 10-digit Phone Number (area code and number)

In preparation for completing the forms, please gather your I-9 documents.

Once logged in to Employment Center, your Form I-9 should take approximately 5-10 minutes to complete. **Please** double check the data you enter as data accuracy is essential in your Form I-9.

If you have any questions or difficulty accessing the site, please contact your hiring department Administrator or Coordinator.

Once again, we would like to extend a warm welcome to you as you join us!

Sincerely,

University of Nebraska Medical Center.

Procedures

1. Click "Employment Center" link in e-mail. The Online New Hire Packet login page will appear.

ONLINE NEW HIRE PACKET			
Welcome to Onboarding.	LOGIN ID*		
This site provides access to your New Hire Packet.			
To begin, enter your User ID and Password.			
Please enter your User ID and Password. This information is only used to dentify your account and it is protected by industry standard SSL encryption.	PASSWORD*		
required fields			
More about security	LOG IN		
Vinimum requirements			

- 2. Enter Login Id Indicated in Email
- 3. Enter Password Indicated in E-mail
- 4. Click "Log In"

ONLINE NEW HIRE PACKET		
Welcome to Onboarding. This site provides access to your New Hire Packet. To begin, enter your User ID and Password. Please enter your User ID and Password. This information is only used to dentify your account and it is protected by industry standard SSL encryption. required fields More about security dinimum requirements	Before you are able to continue, you are required to create a new password. The password must be 8 - 16 Numbers in length. NEW PASSWORD* CONFIRM PASSWORD*	
	CHANGE PASSWORD	

- 5. Create and Confirm New Password
- 6. Click "Change Password"

ONLINE NEW HIRE PACKET			
Welcome to Onboarding.		Thank you. Your password was succesfully	
This site provides access to your New Hire Packet.		updated. You may continue with your login.	
To begin, enter your User ID and Password.	_		
Please enter your User ID and Password. This information is only used to identify your account and it is protected by industry standard SSL encryption.		CONTINUE	
*required fields			
More about security			
Minimum requirements			

7. Click "Continue"

WELCOME TO YOUR EMPLOYMENT CENTER!			
Ve are excited to welcome you as our new team member!			
'ou are now ready to begin completing your Form I-9. The process takes etween 5 and 10 minutes to complete and doesn't need to be done all at once.	2 Forms to Complete		
lease complete this form before your start date. If you need any assistance	Personal Information		
lease reach out to your hiring manager or HR Representative.	19		
EFX.			
2019 Equifax, Inc., All rights rese Privacy Policy Terms of Use	erved		

8. Click "Continue"

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		Personal Information	
PERSONAL IDENTIFICATIO	N		
Social Security Number*	C	onfirm Social Security Number*	
۰		۲	- OR - SSN Applied For
First Name (Given Name)*	Middle Initial	Last Name (Family Name)*	Other Last Name Used
Jason	К	Donald	
Email Address*	Telephone*		Date of Birth*
ajhuerta@unmc.edu		(402) 871-3122	MM-DD-YYYY
PHYSICAL ADDRESS			
Street Address*		Apt	
Zip code*	Ci	ity*	State*
County*			
oounty			

Note: Even though there is no (*) for the Middle Initial, enter N/A there if you do not have a Middle name.

9. Complete the "Personal Information" Section. All required fields are marked with an asterisk (*).

By electronically signing this	document below, you:			
 Agree that your initials transaction as yours. Agree that because an secure. You also agree Understand that a rec Attest that the inform auto-fill other required 	, in conjunction with yo electronic record or tr that you will not discle ord or signature may ne ation you have provided documentation.	bur personal password t ransaction undertaken w ose your password to an ot be denied legal effect d is correct to the best o	hat you used to gain access t ith your password will be attu- nother person. or enforceability solely becan of your knowledge, and unders	o the system, will identify that record or ributed to you, it is essential that you keep it use it is in electronic form. stand that such information may be used to
Your Initials:*				
	_			-

- 10. Review information in "Signature" Section
- 11. Enter your Initials in the "Your Initials" field based in the information you entered in "Personal Information" Section First Name, Middle Initial & Last Name (Family Name)
- 12. Click "Continue"

	Employme Departm	ent Eligibility \ ent of Homeland	/erification Security	USCIS Form I-S
	U.S. Citizen	ship and Immigrat	ion Services	Expires 08/31/2015
START HERE. Read instructi completion of this form. Emplo	ons carefully before completing th oyers are liable for errors in the co	is form. The instruction of this form.	ons must be available, either in pa	per or electronically, during
ANTI-DISCRIMINATION NOTICE may present to establish employr a future expiration date may also	E: It is illegal to discriminate against ment authorization and identity. The r constitute illegal discrimination.	work-authorized individu refusal to hire or continu	ials. Employers CANNOT specify where the second sec	nich document(s) an employee ne documentation presented has
Section 1. Employee Inf Review information in English R	formation and Attestation		I-9 Instructions in Engli	sh <u>I-9 Instrucciones en Españ</u> i
Employees must complete and	sion Section 1 of Form I-9 no later f	hen the first day of em	nlovment but not before accenting	a ioh offer
 Misur Employees Information 		nan me met day er em	bioginioni, sat not service decepting t	
 <u>view Employee miormation</u> Employment Date (<i>mm/dd/yyyy</i>) 	I			
Employment Date (<i>mm/dd/yyyy</i>) 08/01/2019				
Citizenship Attestation	ovides for imprisonment and/or fin	es for false statement	s or use of false documents in cor	nnection with the completion
Citizenship Attestation	ovides for imprisonment and/or fin /, that I am	es for false statement	s or use of false documents in cor	nnection with the completion
Citizenship Attestation am aware that federal law pro of this form. attest, under penalty of perjury 1. A citizen of the United Stat	ovides for imprisonment and/or fin /, that I am es @	es for false statement	s or use of false documents in cor	nnection with the completion
Citizenship Attestation am aware that federal law pro of this form. Attest, under penalty of perjury 1. A citizen of the United Stat 2. A noncitizen national of the	ovides for imprisonment and/or fin , that I am es @ • United States (see instructions) @	es for false statement	s or use of false documents in cor	nnection with the completion
Citizenship Attestation Citizenship Attestation I am aware that federal law pro of this form. I attest, under penalty of perjury 1. A citizen of the United Stat 2. A noncitizen national of the 3. A lawful permanent resider	vides for imprisonment and/or fin /, that I am es @ e United States (see instructions) @	es for false statement	s or use of false documents in cor	nnection with the completion

I did not use a preparer or translator.			
A preparer(s) and/or translator(s) assisted the e	mployee in completing Section	1.	
	, , p		

14. Select Option that applies to you under the "Prepared and/or Translator Certification" Section **15. Click "Continue"**

EMPLOYEE REVIEW

Review information in English | Revisar información en Español

I-9 Instructions in English I-9 Instrucciones en Español

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This information should be reviewed and completed by the employee who prepared the I-9 form.

Jason K Donald

Other Names Used: xxxxxxX3

Date of Birth: 06/02/1981 U.S. Social Security Number: 506-71-6341

Address: 8110 N 28th Ave Omaha, NE 68112 E-mail Address: ajhuerta@unmc.edu Telephone Number: 4028713122

Work Status: A Citizen of the United States

Employment Date: 08/01/2019

EMPLOYEE ELECTRONIC SIGNATURE

Employee Signature in English | Firma del empleado en español

I attest that I have read, understand, and agree to the statements appearing in the form I-9 in addition to the following:

By providing your signature below, you:

By checking this checkbox, I attest that I have read, understand, and agree to the statements appearing on the Form I-9 above in addition to the following:

- · Agree to electronically sign this document.
- Understand 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.
- . Understand that the employer may electronically verify your work authorization with the United States Government.

CEdit Personal Info

« BACK

CONTINUE »

16. Review information on this page in detail as information must be accurate.

17. Note: University of Nebraska Medical Center (UNMC) participates in E-Verify:

- a. **E-Verify** is a United States Department of Homeland Security (DHS) website that allows businesses to determine the eligibility of their employees, both U.S. and foreign citizens, to work in the United States.
- b. E-Verify compares information from an employee's Employment Eligibility Verification Form I-9 to data from U.S. Department of Homeland Security and the Social Security Administration to confirm employment eligibility. The program is operated by the DHS in partnership with the Social Security Administration.
- 18. Check box 📃 under "Employee Electronic Signature" Section
- 19. Click "Continue"



- 20. Click "Email Receipt Code"
- 21. Review the "Acceptable Documents" Section. Thereafter, Click "Continue"

ACCEPTABLE DOCUMENTS
Please remember to bring ORIGINAL , unexpired documentation to your appointment as follows - a List A document OR one document each from List B and List C. List A documents establish identity and authorization to work in the United States, while list B documents establish identity only and List C documents establish work authorization only. Examples of each are listed below.
If your employer participates in the Department of Homeland Security's E-Verify program to verify employees work authorization please note that any identity document you present must contain a photograph.
When you completed Section 1 of the Form I-9 you provided your electronic signature, which will be applied to Further Action Notices issued through the E-Verify program. Such notices are issued when there is a tentative non-confirmation (TNC) due to a discrepancy in the information and you decide to contest/not consent the TNC issued by either the Social Security Administration or Department of Homeland Security.
LIST A DOCUMENTS
U.S. Passport or U.S. Passport Card
LIST B DOCUMENTS
 Driver's License Issued by State or Possession with Photo ID Card Issued by State or Possession or Local Government with Photo ID Card Issued by Federal, State, Possession or Local Government with Photo School ID Card with Photo Voter's Registration Card with Photo U.S. Military Card Military Dependent's ID Card U.S. Coast Guard Merchant Mariner Card Native American Tribal Document with Photo Canadian Driver's license
LIST C DOCUMENTS
 Social Security Account Number Card Without Employment Restriction Original Birth Certificate or Certified Copy with Official Seal Form FS-545 - Certification of Birth Abroad from Dept. of State Form DS-1350 - Certification of Report of Birth Abroad from Dept. of State Form FS-240 - Consular Report of Birth Abroad from Dept. of State Native American Tribal Document Form I-179 - U.S. Citizen ID Card Form I-179 - ID Card for Use of Resident Citizen In the U.S. Employment authorization document issued by DHS (US Citizen or Non-Citizen)
Gedit Personal Info

Congratulations! You completed Section 1 of the I-9 Form. Proceed to log out from system.

V	University of Nebraska Medical Center
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		WELCOME TO YOUR EMPLOY	MENT CENTER!	
Welcome	Congratulations		Jason K Donald, REG OTHER ACAD SA Affairs	AL, Academic
Congratula	tions! You are finished with	the process.	😪 Personal Information	Ð
			9	Ð
		EFX'		
		2019 Equifax, Inc., All rights re Privacy Policy Terms of l	iserved Ise	

Please bring your supporting document(s) to your department Administrator/PA Coordinator on your first day of employment. Section 2 of the Form I-9 will be completed once department Administrator/PA Coordinator reviews documents.

Note: UNMC must complete and sign Section 2 of Form I-9 Employment Eligibility Verification, within 3 business days of the employee date of hire.