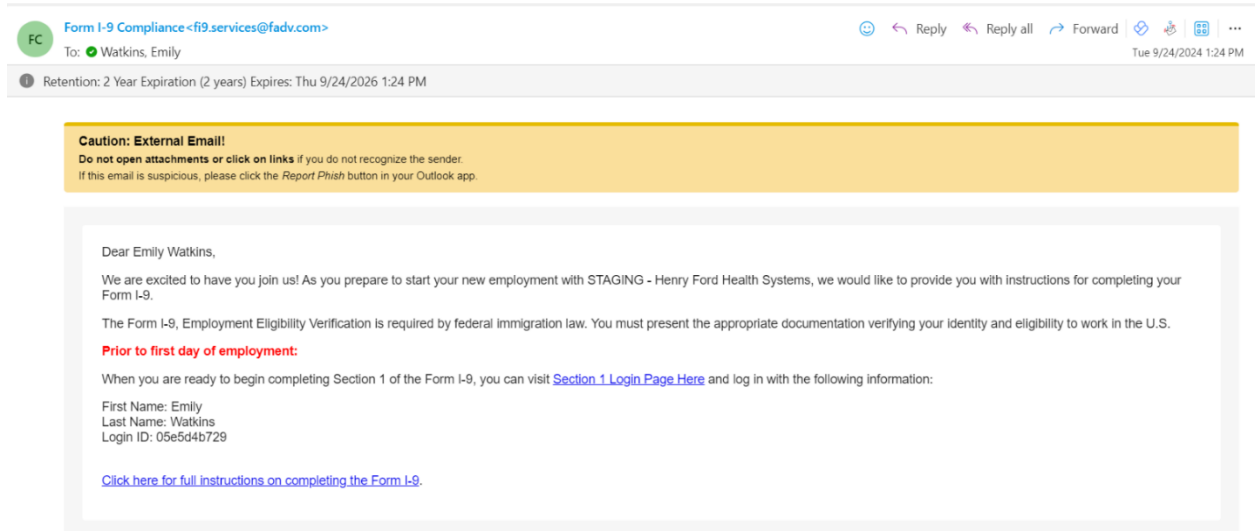




What the hire and their designated representative sees

1. The hire will receive an email like the one below telling them to login.



2. They then need to enter the information below, all included in the original email.

The form is titled 'eForm I-9 Login' in a large, bold, dark blue font. Below the title, there are three input fields with labels to their left: 'First Name:', 'Last Name:', and 'Login ID:'. Each label is in a bold, dark blue font. The input fields are white with a light gray border. Below these fields is a 'Log In' button with a blue border and the text 'Log In' in a blue font.

3. They will then be prompted to fill out the form and hit next.

Employee Information

► **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](#).
[Click here to view List of Acceptable Documents](#)

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.

☐ Check box to show the Preparer / Translator section

Last Name	<input type="text" value="Watkins"/>	?
First Name	<input type="text" value="Emily"/>	?
Middle Initial	<input type="text" value="K"/>	?
Other Last Names Used	<input type="text" value="(if any)"/>	?
Address	<input type="text" value="205 N East Ave"/>	?
Apt. Number	<input type="text"/>	?
City or Town	<input type="text" value="Jackson"/>	?
State	<input type="text" value="Michigan"/>	?
Zip	<input type="text" value="49202"/>	?
Date of Birth	<input type="text" value="01/01/2001"/>	?
U.S. Social Security Number	<input type="text" value="111-11-1111"/>	?
	<input type="checkbox"/> SSN Applied For	
Email	<input type="text" value="ewatkin3@hfhs.org"/>	?
Telephone Number	<input type="text" value="111-111-1111"/>	?

Next

4. Then they will be asked about their citizenship status.

Step 1 Employee Information	Step 2 Citizenship or Immigration Status	Step 3 eDocuments	Step 4 Employee eSignature	Step 5 Complete
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Citizenship or Immigration Status

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.

Check one of the following boxes to attest to your citizenship or immigration status:

☒ 1. A citizen of the United States ?

☐ 2. A noncitizen national of the United States (See instructions) ?

☐ 3. A lawful permanent resident (Enter USCIS or A-Number.) ?

☐ 4. A noncitizen (other than **Item Numbers 2.** and **3.** above) authorized to work until (exp. date, if any) ?

☐ N/A - Not Applicable

If you check **Item Number 4.**, enter one of these:

-- Select a Document --

USCIS/A-Number ? Form I-94 Admission Number ? Foreign Passport Number and Country of Issuance ?

 OR OR

Back
Next

5. They will then be asked to select which documents they wish to use for verification and upload copies of their documents.

You are required to attach legible copies (front and back) of unexpired document(s) that establish both your identity and authorization to work in the United States, as identified on the Form I-9 Lists of Acceptable Documents. You can choose to attach document(s) of your choice from either List A OR List B & List C.

Click [here](#) to view the [Lists of Acceptable Documents](#) options.

The following Identity and Employment Authorization Documents, I choose to upload are:

☐ List A: Document that establish both Identity and Employment Authorization

☐ List B: Document that establish Identity
AND

List C: Document that establish Employment Authorization

Back

Next

You are required to attach legible copies (front and back) of unexpired document(s) that establish both your identity and authorization to work in the United States, as identified on the Form I-9 Lists of Acceptable Documents. You can choose to attach document(s) of your choice from either List A OR List B & List C.

Click [here](#) to view the [Lists of Acceptable Documents](#) options.

The following Identity and Employment Authorization Documents, I choose to upload are:

- ☐ List A: Document that establish both Identity and Employment Authorization
- ☒ List B: Document that establish Identity

Document Title

Driver's license issued by state/territory



AND

List C: Document that establish Employment Authorization

Document Title

Social Security Card (Unrestricted)



Click "Add an eDocument" to begin the document (front and back copies) attachment process.

Add an eDocument

Back

Next

- Next they will have to sign and select a security question

Employee eSignature

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.

Last Name

Watkins

First Name

Emily

Middle Initial Name

K

Security Question

What is your mother's name? ▼

Your answer

.....

When the **'Sign'** button below is clicked, you acknowledge, agree and attest that you:

- Have reviewed and confirmed that the information in the Section 1 is true and correct to the best of your knowledge.
- Are the person named in Section 1.
- Freely intend to create and are adopting as your own a legally binding electronic signature on this electronic document that carries the same legal effect and enforceability as your handwritten signature.
- Understand that you may refuse to sign this document electronically by selecting the 'Back' button below, or close the browser window, but instead have freely elected to sign electronically.

Back

Sign

Please upload eDocument and click 'Next'

7. Once signed, it will take them to a form to select an individual to complete the verification process.

Section 2 EMAIL INVITATION REQUIRED

REQUIRED NEXT STEP - DO NOT EXIT

- Select an individual, 21 years of age or older, to **meet with in person** to complete Section 2 of the Form I-9 on behalf of the employer.
- This person will review and record the original documents that you present for Identity and Employment Authorization in the United States.
- You may provide original documents from either List A or List B and C as outlined in the [LISTS OF ACCEPTABLE DOCUMENTS](#)

IMPORTANT: In order for Employer to remain in compliance with the Department of Homeland Security, you **MUST** meet with this individual in person and complete Section 2 of the Form I-9 within your third day of employment.

1. Enter the Last Name and First Name of the individual selected to complete Section 2 (this individual must be someone you will meet in-person, so they can physically review your documents).

Last Name:

First Name:

2. Enter their email address

Email:

3. Re-enter the email address to confirm

Email:

4. Click "Send Invitation" and a secure link will be sent for Section 2 completion. You must be physically present during the Section 2 completion process.

Send Invitation

8. The individual they select will receive an email



From: Form I-9 Compliance <fi9.services@fadv.com>
Sent: Tuesday, September 24, 2024 1:40 PM
To: Ensley, Rosa <rensley1@hfhs.org>
Subject: [Stage] Electronic Form I-9 Invitation (Company ID: demohfhs)

Caution: External Email!

Do not open attachments or click on links if you do not recognize the sender.
If this email is suspicious, please click the *Report Phish* button in your Outlook app.

Emily Watkins has selected you to complete Section 2 of the Electronic Form I-9 as an Authorized Representative for STAGING - Henry Ford Health Systems.
Instructions:

- You both are required to meet each other in person
- Emily Watkins is required to show you the documents they selected for you to complete Section 2
- Emily Watkins should show you an original document from List A OR an original document from both List B AND List C. [View acceptable documents by clicking here](#)
- **Section 2 needs to be completed within 48 hours of receiving this email invite**

Let's get started!

Please visit [The Form I-9 Login Page Here](#) and log in with the following information:

First Name: Ensley


Last Name: Rosa

Login ID: be41eb41ab

9. They will be prompted to login with the information found in the email. Once they login, they will see a popup.

U.S. Citizenship and Immigration Services

Information

 You have been selected by **Emily Watkins** to complete Section 2 of the Form I-9.

Prior to proceeding, please confirm the following:

1. You will meet each other **in person**.
2. **Emily Watkins will provide you documents.**
3. You will review and record that document information **only**.

DO NOT RECORD ANY OF YOUR PERSONAL DOCUMENT INFORMATION ON THE FORM I-9

Click OK below to confirm your understanding of the above.

OK

10. The selected individual must meet with the candidate and validate the documents the candidate uploaded. They will only be able to use those document.
11. They will then need to fill out section 2 of the form.

Section 2. Employer 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, and must physically examine one document from List A OR a combination of documentation from List B and List C. Enter any additional documentation in the Additional box; see Instructions.

List A	OR	List B	AND	List C
Document Title 1 [?]		List B and C Documents [?]		
Issuing Authority [?]				
Document Number (if any) [?]				
Expiration Date (if any) [?]				
Document Title 2 (if any) [?]				
Issuing Authority [?]				
Document Number (if any) [?]				
Expiration Date (if any) [?]				
Document Title 3 (if any) [?]				
Issuing Authority [?]				
Document Number (if any) [?]				
Expiration Date (if any) [?]				
		Driver's license is [?] Social Security Ca [?] -- Select Issuing A [?] -- Select Issuing A [?] Enter Issu. Auth. Name [?] Document Number [?] [?] Expiration Date [?] [?] <input type="checkbox"/> This document has no expiration date		
		Additional Information [?] <div style="border: 1px solid #ccc; height: 150px; width: 100%;"></div> <input type="checkbox"/> Check here if you used an alternative procedure authorized by DHS to examine documents.		
Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee, (2) the above-listed documentation appears 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.		First Day of Employment (mm/dd/yyyy) [?] 10/14/2024		
Last Name, First Name and Title of Employer or Authorized Representative [?] Rosa Ensley Authorized Represent:		Signature of Employer or Authorized Representative [?] <input type="checkbox"/> Signature Validation		Today's Date (mm/dd/yyyy): [?] 09/24/2024
Employer's Business or Organization Name [?] STAGING - Henry Ford Health Systems		Employer's Business or Organization Address, City or Town, State, ZIP Code [?] STAGING - HFHS City CA 92660		

12. They will then be prompted to e-sign

Section 2 Employer Signature - Instant Signature

To E-Sign: Confirm name is correct, select and answer security question, then click 'E-Sign Document'.

[Make Form I-9 Instructions Available - Click here to Print](#)

First Name

Ensley

MI

Last Name

Rosa

What is your father's name?



....

[Hide content](#)

to create and are adopting as their own a legally binding electronic signature on this electronic document that carries the same legal effect and enforceability as their handwritten signature; and (4) understand that they may refuse to sign this document electronically by selecting the 'Withdraw Consent' button below, but instead have freely elected to sign electronically.

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.

E-Sign Document

Withdraw Consent

Sign On File

I attest, under penalty of perjury, that (1) I have examined the documentation of the above-named employee, (2) the above-listed documentation appears to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

(mm/dd/yyyy) ?

10/14/2024