

## Reverifying Employment Authorizations for Existing Employees

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### Employers may not reverify:

- U.S. Citizens and non-citizen nationals
- Expired U.S. passport or passport card
- Alien registration Receipt Card/Permanent Resident Card (Form I-551)

### Reverification

Hiring departments are responsible for ensuring their employees are eligible to work in the U.S. If a current employee's work authorization is about to expire, the hiring department must reverify the employee's work authorization prior to the expiration date by completing page 2 of the Form I-9. Departments should complete Section 2 of the Form I-9 by using the [SmartForm](#). A copy of the document used to reverify the employee's work authorization must be made and accompanied by the Form I-9.

Work documents that need to be reverified are documents that are found under List A and List C. These documents include, but are not limited to, Form I-766 (Employment Authorization Document), Form I-94, DS2019, and Form I-20. It is important not to reverify the citizenship status and documents listed under the "Employers May Not Reverify" section.

It is highly recommended to remind the employee at least 90 days prior to the employee's work authorization expiration to provide an unexpired document (or acceptable receipt) from List A or List C to show the employee's eligibility to continue working for the University.

### To reverify, you must:

- Record the employee's name clearly on the top of page 2 of Form I-9. A copy of the form can be found on the Human Resource Services Forms page, <http://www.hr.ufl.edu/forms/>
- Examine the renewed documentation to determine if it appears to be genuine and relates to your employee presenting it. If you feel the document does not reasonably appear to be genuine and does not relate to your employee, you should allow your employee to present other documentation from the list of Acceptable Documents under List A or List C.
- Record the document title, document number and expiration date, if any, in Section 3 of Form I-9.
- Sign and date Section 3.
- Mail the completed form along with a copy of the document used for reverification to:

Office of Human Resource Services  
Recruitment and Staffing  
PO Box 115002

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### Resources

Refer to the case scenario below that matches your employee's situation, and use the sample to complete your form. If you do not find a scenario that matches your situation, please contact Recruitment and Staffing at 352-392-2477, or e-mail [ufhr-reverifications@mail.ufl.edu](mailto:ufhr-reverifications@mail.ufl.edu).

### Additional Resources

Find further details on Form I-9 at [http://www.hr.ufl.edu/recruitment/resources/i9\\_resource.asp](http://www.hr.ufl.edu/recruitment/resources/i9_resource.asp) and <http://www.hr.ufl.edu/training/myUFL/toolkits/addpay.asp>, Recruitment & Staffing at 352-392-2477, or e-mail [ufhr-reverifications@mail.ufl.edu](mailto:ufhr-reverifications@mail.ufl.edu).

You may also visit <http://uscis.gov> > Click **I-9 Central** on the right > On the next page, click **I-9 Employment Eligibility Verification** under Forms > Click **Download Form I-9** which will include the instructions.

For additional questions on H-1B Visa status or the Employment Authorization Document, please contact Immigration Compliance Services at 352-392-2477.

For additional information on the F- and J- Visa status, please contact the University of Florida International Center at 352-392-5323.

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**Case Scenarios and Samples of Completed Reverification**

**1. I-20 Update (For F1-Visa Holders)**

F1-Visa holders must possess an unexpired passport, Form I-94, and Form I-20 upon hire. The hiring department would typically reverify the F1-Visa holder's Form I-20 when expired. The employee must contact the University of Florida International Center for an updated Form I-20. Departments do not need to reverify F1-Visa holder's passport and Form I-94, which does not contain an expiration date.

Section 2. Employer or Authorized Representative Review and Verification		
<i>(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)</i>		
Employee Last Name, First Name and Middle Initial from Section 1: <b>Doe, John</b>		
List A Identity and Employment Authorization	OR List B Identity	AND List C Employment Authorization
Document Title:	Document Title:	Document Title:
Issuing Authority:	Issuing Authority:	Issuing Authority:
Document Number:	Document Number:	Document Number:
Expiration Date (if any)(mm/dd/yyyy):	Expiration Date (if any)(mm/dd/yyyy):	Expiration Date (if any)(mm/dd/yyyy):

When reverifying Form I-20, the employee's departmental representative must record the employee's Last Name, First Name and Middle Initial in Section 2 (see above), and then record Document Title, Document Number, and the new Expiration Date in Section 3 (see below). Also, the employee's departmental representative must sign, date, and print their name on the form prior to submitting to the Office of Human Resources (see below).

Section 3. Reverification and Rehires <i>(To be completed and signed by employer or authorized representative.)</i>		
A. New Name (if applicable) Last Name (Family Name) First Name (Given Name) Middle Initial		B. Date of Rehire (if applicable) (mm/dd/yyyy):
C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below.		
Document Title: I-20	Document Number: N000000000	Expiration Date (if any)(mm/dd/yyyy): 08/22/2015
I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.		
Signature of Employer or Authorized Representative:	Date (mm/dd/yyyy):	Print Name of Employer or Authorized Representative:

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**2. DS2019 Update (For J1-Visa Holders)**

The hiring department would typically reverify the J1-Visa holder's DS2019 when expired. The employee must contact the University of Florida International Center for an updated DS2019. Departments do not need to reverify the J1-Visa holder's passport and Form I-94, which does not contain an expiration date.

**Section 2. Employer or Authorized Representative 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. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)*

Employee Last Name, First Name and Middle Initial from Section 1: **Doe, John**

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title:		Document Title:		Document Title:
Issuing Authority:		Issuing Authority:		Issuing Authority:
Document Number:		Document Number:		Document Number:
Expiration Date (if any)(mm/dd/yyyy):		Expiration Date (if any)(mm/dd/yyyy):		Expiration Date (if any)(mm/dd/yyyy):

When reverifying DS2019, the employee's departmental representative must record the employee's Last Name, First Name and Middle Initial in Section 2 (see above), and then record Document Title, Document Number, and the new Expiration Date in Section 3 (see below). Also, the employee's departmental representative must sign, date and print their name on the form prior to submitting to the Office of Human Resources (see below).

**Section 3. Reverification and Rehires** *(To be completed and signed by employer or authorized representative.)*  
A. New Name (if applicable) Last Name (Family Name) First Name (Given Name) Middle Initial B. Date of Rehire (if applicable) (mm/dd/yyyy):

C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below.

Document Title: DS2019	Document Number: N000000000	Expiration Date (if any)(mm/dd/yyyy): 09/29/2016
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**I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.**

Signature of Employer or Authorized Representative: \_\_\_\_\_  
Date (mm/dd/yyyy): \_\_\_\_\_  
Print Name of Employer or Authorized Representative: \_\_\_\_\_

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**3. Employment Authorization Card Update**

The Employment Authorization Card (EAC) is granted to non-immigrants who are authorized to work in U.S. This includes F-1 students or post-graduates on Optional Practical Training (OPT). F-1 post-graduates who graduated from a qualifying science, technology, engineering, or mathematics (STEM) degree, may be eligible to apply for a 17-month STEM extension. For additional assistance on OPT for UF graduates, please contact the University of Florida International Center.

A J-2 dependent status is also eligible for an EAC. For additional assistance on applying for an EAC, please visit Forms page on United States Citizenship and Immigration Services at [www.uscis.gov](http://www.uscis.gov).

<b>Section 2. Employer or Authorized Representative Review and Verification</b>		
<i>(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)</i>		
Employee Last Name, First Name and Middle Initial from Section 1: <b>Doe, John</b>		
List A	OR	List B
Identity and Employment Authorization		Identity
Document Title:		Document Title:
Issuing Authority:		Issuing Authority:
Document Number:		Document Number:
Expiration Date (if any)(mm/dd/yyyy):		Expiration Date (if any)(mm/dd/yyyy):
	AND	List C
		Employment Authorization
		Document Title:
		Issuing Authority:
		Document Number:
		Expiration Date (if any)(mm/dd/yyyy):

When reverifying, the employee's departmental representative must record the employee's Last Name, First Name and Middle Initial in Section 2 (see above) and then record the Document Title, Document Number, and the new Expiration Date in Section 3 (see below). In addition, the departmental representative must sign, date and print their name on the form prior to submitting it to the Office of Human Resources.

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<b>Section 3. Reverification and Rehires</b> <i>(To be completed and signed by employer or authorized representative.)</i>		
A. New Name <i>(if applicable)</i> Last Name <i>(Family Name)</i> First Name <i>(Given Name)</i> Middle Initial		B. Date of Rehire <i>(if applicable)</i> <i>(mm/dd/yyyy)</i> :
C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below.		
Document Title: Employment Authorization Card	Document Number: XXX0000000000	Expiration Date <i>(if any)</i> <i>(mm/dd/yyyy)</i> : 09/29/2016
I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.		
Signature of Employer or Authorized Representative:	Date <i>(mm/dd/yyyy)</i> :	Print Name of Employer or Authorized Representative:

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If the post-graduate's Employment Authorization Document (Form I-766) expires while his or her STEM extension application is pending, he or she is authorized to work until USCIS makes a decision on his or her application, but not for more than 180 days from the date the initial Employment Authorization Document (Form I-766) expires.

**4. H1-B Visa (I-797A)**

A H1-B Visa is granted for a period of time by the United States Citizenship and Immigration Services (USCIS), but reverification is required based on the expiration date of the H1-B Visa holder's latest Form I-94.

<b>Section 2. Employer or Authorized Representative Review and Verification</b> <i>(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)</i>		
Employee Last Name, First Name and Middle Initial from Section 1: Doe, John		
<b>List A</b> Identity and Employment Authorization	<b>OR</b>	<b>List B</b> Identity
<b>AND</b>		<b>List C</b> Employment Authorization
Document Title:	Document Title:	Document Title:
Issuing Authority:	Issuing Authority:	Issuing Authority:
Document Number:	Document Number:	Document Number:
Expiration Date <i>(if any)</i> <i>(mm/dd/yyyy)</i> :	Expiration Date <i>(if any)</i> <i>(mm/dd/yyyy)</i> :	Expiration Date <i>(if any)</i> <i>(mm/dd/yyyy)</i> :

When reverifying Form I-94 for an H1-B Visa holder, the employee's departmental representative must record the employee's Last Name, First Name and Middle Initial in Section 2 (see above) and then record the Document Title, Document Number, and the new Expiration Date in Section 3 (see below). Also, the employee's departmental representative must sign, date and print their name on the form prior to submitting to the Office of Human Resources.

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<b>Section 3. Reverification and Rehires</b> (To be completed and signed by employer or authorized representative.)			
A. New Name (if applicable) Last Name (Family Name) First Name (Given Name) Middle Initial			B. Date of Rehire (if applicable) (mm/dd/yyyy):
C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below.			
Document Title: I-94	Document Number: 0000000000	Expiration Date (if any)(mm/dd/yyyy): 09/29/2016	
I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.			
Signature of Employer or Authorized Representative: 	Date (mm/dd/yyyy):	Print Name of Employer or Authorized Representative:	

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*Filing for H1-B Extension*

If an H1-B Visa holder files an extension, the employee's department does not need to reverify the employee's Form I-94 until USCIS has made a decision on the petition, which should take less than 240 days from the day the extension is filed.

When the petition is approved, the employee will receive a Form I-797(A), which includes Form I-94A. The employee's department must immediately reverify the employee's work authorization by completing Form I-9 as stated above, entering the Document Title as "Form I-94A" with an Expiration Date as the date stated on the Form I-94A that is attached to Form I-797(A).

<b>Section 3. Reverification and Rehires</b> (To be completed and signed by employer or authorized representative.)			
A. New Name (if applicable) Last Name (Family Name) First Name (Given Name) Middle Initial			B. Date of Rehire (if applicable) (mm/dd/yyyy):
C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below.			
Document Title: I-94A	Document Number: 0000000000	Expiration Date (if any)(mm/dd/yyyy): 05/25/2017	
I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.			
Signature of Employer or Authorized Representative:	Date (mm/dd/yyyy):	Print Name of Employer or Authorized Representative:	

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