



ELECTRONIC FORM I-9 & E-VERIFY | USER GUIDE

[November 2020]

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NEW EMPLOYEE | NEW ELECTRONIC FORM I-9 SECTION 1

- ❖ NEW EMPLOYEE: You will receive an electronic invitation in their mailbox from Form I-9 Compliance (services@form19.com). The login ID will be required to log in, please copy the ID or write it down for reference and click the “Invitation Link” hyperlink within the email message.

Welcome to the Fannie Mae Electronic Form I-9 site

Action Needed

We are excited to have you join our team!

Fannie Mae is required to submit a completed Form I-9 verification of the identity and employment authorization of each new colleague hired. [Click here for full instructions on completing the Form I-9.](#)

Step 1: Prior to first day of employment
Complete Section 1 of an Electronic Form I-9 by clicking the “Invitation” link below.

Invitation Link: <https://www.formi9.com/FormI9Verify/FormI9eFormI9Login.aspx>
First Name: John
Last Name: Smith
Login ID: 173de684b3

Step 2: By your first day of employment
Please assign and meet with your designated authorized representative and bring all required documents to complete your Form I-9. This meeting must happen between the completion of Section 1 and your first day of employment. Your designated authorized representative will complete Section 2 of the Electronic I-9. You are required to bring with you an original document from List A OR an original document from both List B AND List C.

[View acceptable documents by clicking here.](#)

- ❖ NEW EMPLOYEE: Clicking Invitation Link within email will take you to login page. Paste the login ID – or type it in if you’ve written it down – then click “Log in” to enter.

Section 1 Login

First Name:

Last Name:

Login ID:

- ❖ NEW EMPLOYEE: Enter necessary information into the form and click “Next” at the bottom of the form. You can view the instructions by clicking the “View Instructions” button below or view a list of acceptable documents by clicking the “View Documents” button.

Step 1
Employee Information

Step 2
Citizenship Status

Step 3
Employee eSignature

Step 4
Complete

Employee Information

► **START HERE:** Read instructions carefully before completing this form. The instructions must be available during completion of this form.
[Click here to view Instructions](#)
[Click here to view List of Acceptable Documents](#)

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

☐ Check box to show the Preparer / Translator section

Last Name

Smith

?

First Name

John

?

Middle Initial

?

Other Last Names
Used

(if any)

?

Address

Street Number and Name

?

Apt. Number

?

City or Town

?

State

- Select State -

i

?

Zip

?

Next

Complete data entry and click 'Next'.

❖ NEW EMPLOYEE: Enter necessary Citizenship Status information into the form.

Citizenship Status

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.
I attest, under penalty of perjury, that I am (check one of the following):

☒ A citizen of the United States

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

☐ A lawful permanent resident
(Alien Registration Number/USCIS Number)

☐ An alien authorized to work until
(Expiration date, if applicable, mm/dd/yyyy)

☐ N/A - Not Applicable

Some aliens may write "N/A" in this field.

Aliens authorized to work must provide only one of the following document numbers to complete Form I-9:
An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.

☐ 1. Alien Registration Number / USCIS Number:

☐ 2. Form I-94 Admission Number:

☐ 3. Foreign Passport Number:

OR

OR

OR

- ❖ NEW EMPLOYEE: Authorize the information provided by filling out the eSignature.

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

Smith

First Name

John

Middle Initial Name

Security Question

What is your mother's name?

Your answer

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

Data is successfully saved to server. You can sign esignature now.

Step 1
Employee Information

Step 2
Citizenship Status

Step 3
Employee eSignature

Step 4
Complete

Employee eSignature Result

Electronic Signature is **VERIFIED AND SECURE**

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.

Instant Signature

Smith, John

electronically signed the

Form I-9, 10/21/2019 , dated

Thursday, October 22, 2020 8:23 AM Pacific Time at the Employee's signature line.

Back

Sign

Section 1 is completed. Redirecting...

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NEW EMPLOYEE | ASSIGNING AN AUTHORIZED REPRESENTATIVE

- ❖ NEW EMPLOYEE: You will be redirected to identify an Authorized Representative
- **IMPORTANT:** In order for Fannie Mae to remain in compliance with Department of Homeland Security requirements, you MUST meet this individual in person and complete Section 2 of the Form I-9 within three business days.
- **CHOOSE YOUR DESIGNATED REPRESENTATIVE.**
 - Your designated representative must meet these requirements:
 - Is able to meet with you in person.
 - Is over the age of 18.

Section 2 EMAIL INVITATION REQUIRED

You can provide any Documents from either List A or List B and C as outlined on the [LISTS OF ACCEPTABLE DOCUMENTS](#). Click here to review those document options [LIST OF ACCEPTABLE DOCUMENTS](#)

IMPORTANT: In order for Fannie Mae to remain in compliance with Department of Homeland Security requirements, you **MUST** meet this individual in person and complete Section 2 of the Form I-9 within three business days.

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:

Thurston

First Name:

Vianette

2. Enter their email address

Email:

vianette_thurston@fanniemae.com

3. Confirm their email address

Email:

vianette_thurston@fanniemae.com

4. Enter your email address to receive Section 2 Access Token

Email:

jania_lewis@fanniemae.com

Send Invitation

Email:

6. Click "Send Invitation" and a secure link along with Section 2 Access Token will be sent for Section 2 completion. You must be physically present during the Section 2 completion process.

- ❖ NEW EMPLOYEE: Will now meet with their designated Authorized Representative to record the Identity and Employment Authorization Documents that they provide them for Section 2 of the Form I-9.
- ❖ **PLEASE NOTE:** If you decide to use a List A document, Fannie Mae is required to retain a copy of the document for federal retention purposes.
- ❖ [Click here to review those document options](#) **LISTS OF ACCEPTABLE DOCUMENTS**
- ❖ NEW EMPLOYEE: Will receive an email from Form I-9 Compliance services@formi9.com with Section 2 Access Token.
- ❖ NEW EMPLOYEE: Must provide the Section 2 Access Token

You have now sent an invitation to your designated individual to complete Section 2 of the Electronic Form I-9 as the Authorized Representative for Fannie Mae.

You must provide the Section 2 Access Token below to your designated individual for Section 2 of the Form I-9 access.

No Further Action Required for New Employee. Authorized Representative can now follow pages 9-14 for Section 2 Processing

AUTHORIZED REPRESENTATIVE | COMPLETING SECTION 2

- ❖ AUTHORIZED REPRESENTATIVE: Will receive an email from Form I-9 Compliance (services@formi9.com) with instructions and Login Credentials
 - **Instructions:**
 - Both parties are required to meet in person
 - Employee will provide Access Token to Auth Rep
 - Employee is required to show Auth Rep an original document from List A OR an original document from both List B AND List C.
 - Auth Rep will review and record the original documents presented by the Employee in Section 2 of the Form I-9.
 - Auth Rep will be prompted through the form to fill out all required fields

John Smith selected you to complete **Section 2** of the Electronic Form I-9 as the Authorized Representative for **Fannie Mae**.

Instructions:

- You both are required to meet in person
- John Smith is required to 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](#)
 - You will review and record the original documents presented by John Smith in Section 2 of the Form I-9.
- You will be prompted through the form to fill out all required fields

[View USER GUIDE - SECTION 2](#)

To begin:
Please visit [the Form I-9 login page here](#) and log in with the following information:

First Name: Vianette
Last Name: Thurston
Login ID: c51fbd29b
Section 2 Access Token: John Smith will need to provide the Section 2 Access Token

eForm I-9 Login

First Name:

Vianette

Last Name:

Thurston

Login ID:

Section 2 Access Token:

Log In

AUTHORIZED REPRESENTATIVE | PROCESSING SECTION 2

- ❖ Authorized Representative: Note – Section 1 is now populated with data EMPLOYEE provided earlier.
- ❖ Authorized Representative: Scroll down to the bottom of the form to fill out Section 2. Prior to completing Section 2, select Add eDocuments if Employee provided a List A Document.

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 a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")

Employee Info from Section 1

Last Name (Family Name)

First Name (Given Name)

M.I.

Citizenship/Immigration Status

Smith

John

N/A

1

List A

Identity and Employment Authorization

Document Samples

OR

List B

Identity

AND

List C

Employment Authorization

Document Title

U.S. Passport

Issuing Authority

Department of State

Document Number

1234567890

Expiration Date (if any)(mm/dd/yyyy)

02/21/2022

Document Title

Issuing Authority

Document Number

Expiration Date (if any)(mm/dd/yyyy)

Document Title

Issuing Authority

Document Number

Expiration Date (if any)(mm/dd/yyyy)

Additional Information

COVID-19

documents physically examined

Other

Select Documents Physically Examined

QR Code - Section 2 & 3

Do Not Write in This Space

Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above named employee, 2) the above-listed document(s) appear 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.

The employee's first day of employment (mm/dd/yyyy)

03/16/2020

(See instructions for exemption)

Signature of Employer or Authorized Representative

Signature Validation

Today's Date (mm/dd/yyyy)

10/22/2020

Title of Employer or Authorized Representative

Authorized Representative

Last Name of Employer or Authorized Representative

Thurston

First Name of Employer or Authorized Representative

Vianette

Employer's Business or Organization Name

Fannie Mae

Employer's Business or Organization Address (Street Number and Name)

1100 15th St NW

City or Town

Washington

State

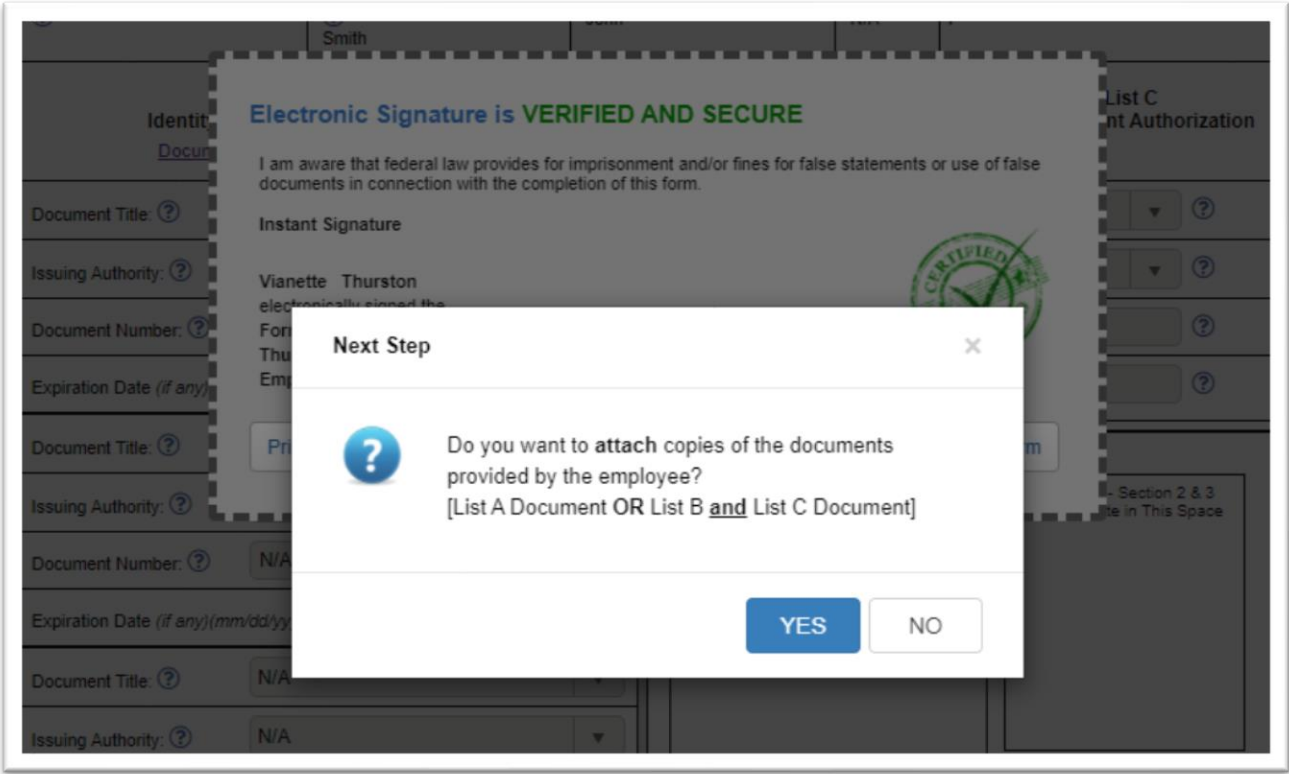
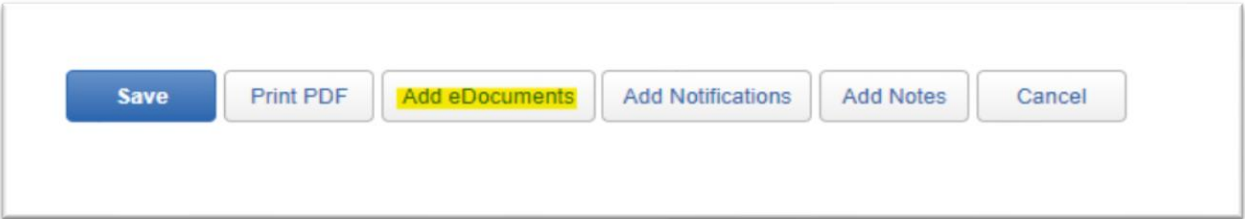
DC

ZIP Code

20005

11

- ❖ Authorized Representative: Upon completing Section 2, select Add eDocuments if Employee provided a List A Document



AUTHORIZED REPRESENTATIVE| AUTHORIZED REPRESENTATIVE SIGNATURE IN COMPLETING SECTION 2

- ❖ Authorized Representative: **Check** the “Signature Validation” box (Signature of Employer or Authorized Representative) in Section 2 to electronically sign Section 2 of the Form I-9
- ❖ Authorized Representative: **Choose** the “Secret Question”
- ❖ Authorized Representative: **Type** in the answer to the “Secret Question”

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 MI Last Name

What is your mother's name? YOUR ANSWER HERE

[Hide content](#)

When the 'E-Sign Document' button below is clicked, the person named above acknowledges, agrees and attests that they (1) have reviewed and confirmed that the information in the Section and signature block referenced above is true and correct, (2) are the person named in that Section of the document, (3) freely intend 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

E-Sign Document Withdraw Consent Sign On File


- ❖ Authorized Representative: **Click** the “E-Sign Document” button to complete the electronic signature process (Section 2)
- ❖ Authorized Representative: **Select** the following:
 - Exit the window by **clicking** the “Close Form” button

Electronic Signature is **VERIFIED AND SECURE**

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.

Instant Signature

[EMPLOYER/AUTHORIZED REPRESENTATIVE NAME HERE]
electronically signed the
Form I-9, 08/31/2019, dated
[DATE AND TIME HERE] at the
Employer's signature line.



Print this E-Signature receipt

Close Form

❖ Section 2 of the electronic Form I-9 is now complete!

SECTION 2 LIST A DOCUMENT

EXAMPLE OF LIST A DOCUMENT INFORMATION RECORDED

Employment Authorization Document (Form I-766)

From top to bottom:

- Employment Authorization Document
(Form I-766)
- Document Title:
USCIS
 - Document Number:
918273645
 - Expiration Date (if any) (mm/dd/yyyy):
09/08/2017
 - Document Title:
[Grayed out | Not an entry data field]
 - Issuing Authority:
[Grayed out | Not an entry data field]
 - Document Number:
SRC1234567890
 - Expiration Date (if any) (mm/dd/yyyy):
[Grayed out | Not an entry data field]
 - Document Title:
[Grayed out | Not an entry data field]
 - Issuing Authority:
[Grayed out | Not an entry data field]
 - Document Number:
[Grayed out | Not an entry data field]
 - Expiration Date (if any) (mm/dd/yyyy):
[Grayed out | Not an entry data field]

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 a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")</i>				
Employee Info from Section 1 ?	Last Name (Family Name) ? [Employee Last Name]	First Name (Given Name) ? [Employee First Name]	M.I. ?	Citizenship/Immigration Status ? 4
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <u>List A</u> Identity and Employment Authorization Special Rules Document Samples </div> <div>OR</div> <div style="text-align: center;"> <u>List B</u> Identity Special Rules </div> <div>AND</div> <div style="text-align: center;"> <u>List C</u> Employment Authorization Special Rules </div> </div>				
Document Title: ? Employment Authorization Document ▼ <input type="checkbox"/> TPS extension		<div style="border: 1px solid #ccc; height: 30px; width: 100%;"></div>		
Issuing Authority: ? USCIS ▼		<div style="border: 1px solid #ccc; height: 30px; width: 100%;"></div>		
Document Number: ? 918273645 Alien Number/USCIS Number Samples		<div style="border: 1px solid #ccc; height: 30px; width: 100%;"></div>		
Expiration Date (if any)(mm/dd/yyyy): ? 09/08/2017		<div style="border: 1px solid #ccc; height: 30px; width: 100%;"></div>		
Document Title: ? ▼		<div style="display: flex;"> <div style="flex: 1; border: 1px solid #ccc; padding: 5px; min-height: 150px;"> Additional Information ? </div> <div style="flex: 1; border: 1px solid #ccc; padding: 5px; min-height: 150px;"> QR Code - Section 2 & 3 Do Not Write in This Space </div> </div>		
Issuing Authority: ? ▼				
Document Number: ? SRC1234567890 Card Number Samples				
Expiration Date (if any)(mm/dd/yyyy): ?				
Document Title: ? ▼				
Issuing Authority: ? ▼				
Document Number: ?				
Expiration Date (if any)(mm/dd/yyyy): ?				

SECTION 2 LIST B AND LIST C DOCUMENTS

EXAMPLE OF LIST B AND LIST C DOCUMENTS INFORMATION RECORDED

List B Document: Driver's license issued by state/territory | List C Document: (Unrestricted) Social Security Card

From top to bottom:

---List B Document---

- Document Title:
Driver's license issued by state/territory
- Issuing Authority:
California
- Document Number:
N123456789
- Expiration Date (if any) (mm/dd/yyyy):
12/31/2018

---List C Document---

- Document Title:
(Unrestricted) Social Security Card
- Issuing Authority:
Social Security Administration (SSA)
- Document Number:
xxx-xx-xxxx
- Expiration Date (if any) (mm/dd/yyyy):
[Grayed out | Not an entry data field]

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 a combination of one document from List B and one document form List C as listed on the "Lists of Acceptable Documents.")

Employee Info from Section 1

Last Name (Family Name)
[Employee Last Name]

First Name (Given Name)
[Employee First Name]

M.I.

Citizenship/Immigration Status
4

List A
Identity and Employment Authorization

Special Rules

Document Samples

OR

List B
Identity

Special Rules

AND

List C
Employment Authorization

Special Rules

Document Title
List B and C Documents

Issuing Authority

Document Number

Expiration Date (if any)(mm/dd/yyyy)

Driver's license is
California

Enter Issu. Auth. Nam

N123456789

12/31/2018

(Unrestricted) S

Social Security A

123-45-6789

☐ This document has no expiration date

Additional Information

QR Code - Section 2 & 3
Do Not Write in This Space

LISTS OF ACCEPTABLE DOCUMENTS

LISTS OF ACCEPTABLE DOCUMENTS

All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

LIST A

Documents that Establish Both Identity and Employment Authorization

OR

LIST B

Documents that Establish Identity

AND

LIST C

Documents that Establish Employment Authorization

1. U.S. Passport or U.S. Passport Card

2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)

3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa

4. Employment Authorization Document that contains a photograph (Form I-766)

5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:

a. Foreign passport; and

b. Form I-94 or Form I-94A that has the following:

(1) The same name as the passport; and

(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.

6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI

1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address

2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address

3. School ID card with a photograph

4. Voter's registration card

5. U.S. Military card or draft record

6. Military dependent's ID card

7. U.S. Coast Guard Merchant Mariner Card

8. Native American tribal document

9. Driver's license issued by a Canadian government authority

For persons under age 18 who are unable to present a document listed above:

10. School record or report card

11. Clinic, doctor, or hospital record

12. Day-care or nursery school record

1. A Social Security Account Number card, unless the card includes one of the following restrictions:

(1) NOT VALID FOR EMPLOYMENT

(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION

(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION

2. Certification of Birth Abroad issued by the Department of State (Form FS-545)

3. Certification of Report of Birth issued by the Department of State (Form DS-1350)

4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal

5. Native American tribal document

6. U.S. Citizen ID Card (Form I-197)

7. Identification Card for Use of Resident Citizen in the United States (Form I-179)

8. Employment authorization document issued by the Department of Homeland Security

Examples of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

Form I-9 11/14/2016 N

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This Organization Participates in E-Verify

Esta Organización Participa en E-Verify



This employer participates in E-Verify and will provide the federal government with your Form I-9 information to confirm that you are authorized to work in the U.S.

If E-Verify cannot confirm that you are authorized to work, this employer is required to give you written instructions and an opportunity to contact Department of Homeland Security (DHS) or Social Security Administration (SSA) so you can begin to resolve the issue before the employer can take any action against you, including terminating your employment.

Employers can only use E-Verify once you have accepted a job offer and completed the Form I-9.

E-Verify Works for Everyone

For more information on E-Verify, or if you believe that your employer has violated its E-Verify responsibilities, please contact DHS.

Este empleador participa en E-Verify y proporcionará al gobierno federal la información de su Formulario I-9 para confirmar que usted está autorizado para trabajar en los EE.UU..

Si E-Verify no puede confirmar que usted está autorizado para trabajar, este empleador está requerido a darle instrucciones por escrito y una oportunidad de contactar al Departamento de Seguridad Nacional (DHS) o a la Administración del Seguro Social (SSA) para que pueda empezar a resolver el problema antes de que el empleador pueda tomar cualquier acción en su contra, incluyendo la terminación de su empleo.

Los empleadores sólo pueden utilizar E-Verify una vez que usted haya aceptado una oferta de trabajo y completado el Formulario I-9.

E-Verify Funciona Para Todos

Para más información sobre E-Verify, o si usted cree que su empleador ha violado sus responsabilidades de E-Verify, por favor contacte a DHS.

888-897-7781

dhs.gov/e-verify



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