

# **I-9 Employment Eligibility Verification and E-Verify Compliance Procedures**

## Document Abuse & over-documentation

- Documentation must only be requested after job offer is made.
- Employer cannot request specific documentation, applicant must decide.
- If new hire provides more documentation than required, new hire should select only the necessary documents. You should inform the employee that he/she can only present documents that meet the requirements either List A or List B and C.

# Completing Form I-9

OMB No. 1615-0047; Expires 06/30/08  
**Form I-9, Employment Eligibility Verification**

Please read instructions carefully before completing this form. The instructions must be available during completion of this form.

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents have a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Verification.** To be completed and signed by employee at the time employment begins.

Print Name: Last First Middle Initial Maiden Name

Address (Street Name and Number) Apt. # Date of Birth (month/day/year)

City State Zip Code Social Security #

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 or national of the United States  
☐ A lawful permanent resident (Alien #) A  
☐ An alien authorized to work until (Alien # or Admission #) \_\_\_\_\_

Employee's Signature Date (month/day/year)

**Preparer and/or Translator Certification.** (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature Print Name

Address (Street Name and Number, City, State, Zip Code) Date (month/day/year)

**Section 2. Employer Review and Verification.** To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number and expiration date, if any, of the document(s).

List A	OR	List B	AND	List C
Document title: _____		_____		_____
Issuing authority: _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): _____		_____		_____

**CERTIFICATION - I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment.)**

Signature of Employer or Authorized Representative Print Name Title

Business or Organization Name and Address (Street Name and Number, City, State, Zip Code) Date (month/day/year)

**Section 3. Updating and Reverification.** To be completed and signed by employer.

A. New Name (if applicable) B. Date of Rehire (month/day/year) (if applicable)

C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.

Document Title: \_\_\_\_\_ Document #: \_\_\_\_\_ Expiration Date (if any): \_\_\_\_\_

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible 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 (month/day/year)

Form I-9 (Rev. 06/05/07) N

## LISTS OF ACCEPTABLE DOCUMENTS

LIST A Documents that Establish Both Identity and Employment Eligibility	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Eligibility
1. U.S. Passport (unexpired or expired)		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		1. U.S. Social Security card issued by the Social Security Administration (other than a card stating it is not valid for employment)
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		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		2. Certification of Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350)
3. An unexpired foreign passport with a temporary I-551 stamp		3. School ID card with a photograph		3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal
4. An unexpired Employment Authorization Document that contains a photograph (Form I-766, I-688, I-688A, I-688B)		4. Voter's registration card		4. Native American tribal document
5. An unexpired foreign passport with an unexpired Arrival-Departure Record, Form I-94, bearing the same name as the passport and containing an endorsement of the alien's nonimmigrant status, if that status authorizes the alien to work for the employer		5. U.S. Military card or draft record		5. U.S. Citizen ID Card (Form I-197)
		6. Military dependent's ID card		6. ID Card for use of Resident Citizen in the United States (Form I-179)
		7. U.S. Coast Guard Merchant Mariner Card		7. Unexpired employment authorization document issued by DHS (other than those listed under List A)
		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		

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

Form I-9 (Rev. 06/05/07) N Page 2

# Section 1: Employee Information and Verification.

Department of Homeland Security  
U.S. Citizenship and Immigration Services

**Form I-9, Employment Eligibility Verification**

Read instructions carefully before completing this form. The instructions must be available during completion of this form.

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents have a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Verification.** To be completed and signed by employee at the time employment begins.

Print Name: Last	First	Middle Initial	Maiden Name
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #

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 or national of the United States

☐ A lawful permanent resident (Alien #) A \_\_\_\_\_

☐ An alien authorized to work until \_\_\_\_\_

(Alien # or Admission #) \_\_\_\_\_

Employee's Signature \_\_\_\_\_ Date (month/day/year) \_\_\_\_\_

**Preparer and/or Translator Certification.** (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature _____	Print Name _____
Address (Street Name and Number, City, State, Zip Code) _____	Date (month/day/year) _____

**Section 2. Employer Review and Verification.** To be completed and signed by employer. Examine one document from List A OR

## Section 1: Employee Information and Verification.

- Must be completed by the New Hire.
- PI/PD/Administrator should verify that all information is provided and correct.
- Should be completed on the first date of employment.
- Preparer/Translator field in Section 1.

## Section 2: Employer Review and Verification.

**Section 2. Employer Review and Verification.** To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number and expiration date, if any, of the document(s).

List A	OR	List B	AND	List C
Document title: _____		_____		_____
Issuing authority: _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): _____				

**CERTIFICATION** - I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) \_\_\_\_\_ and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative	Print Name	Title
Business or Organization Name and Address (Street Name and Number, City, State, Zip Code)		Date (month/day/year)

## Section 2: Employer Review and Verification.

- New Hire provides verification documents from List A, or list B and C.
- All List B documents presented must contain a photograph.
- Employer reviews documents and completes Section 2.
- Must be completed **within 3 business days** of actual start date of employment.
- Make copies of documentation and attach to I-9 Form

## Section 3: Updating and Reverification.

### Section 3. Updating and Reverification. To be completed and signed by employer.

A. New Name *(if applicable)*

B. Date of Rehire *(month/day/year) (if applicable)*

C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.

Document Title: \_\_\_\_\_

Document #: \_\_\_\_\_

Expiration Date (if any): \_\_\_\_\_

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible 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 *(month/day/year)*

## Section 3: Updating and Reverification.

- Used to reverify documents from List C and some from List A.
- List B documents are never reverified.
- Be sure to reverify employees on the new 2007 version of the Form I-9.

# E-Verify: How it Works

- Users submit information provided on the **Form I-9**
- System queries databases of:
  - SSA
  - DHS

Department of Homeland Security U.S. Citizenship and Immigration Services		Form I-9, Employment Eligibility Verification	
Please read instructions carefully before completing this form. The instructions must be available during completion of this form.			
<b>ANTI-DISCRIMINATION NOTICE:</b> It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents have a future expiration date may also constitute illegal discrimination.			
<b>Section 1. Employee Information and Verification.</b> To be completed and signed by employee at the time employment begins.			
Print Name: Last		First	Middle Initial
			Maiden Name
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City		State	Zip Code
			Social Security #
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): <input type="checkbox"/> A citizen or national of the United States <input type="checkbox"/> A lawful permanent resident (Alien #) A _____ <input type="checkbox"/> An alien authorized to work until _____ (Alien # or Admission #) _____	
Employee's Signature		Date (month/day/year)	
<b>Preparer and/or Translator Certification.</b> (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.			
Preparer's/Translator's Signature		Print Name	
Address (Street Name and Number, City, State, Zip Code)		Date (month/day/year)	
<b>Section 2. Employer Review and Verification.</b> To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number and expiration date, if any, of the document(s).			
List A		OR	List B AND List C
Document title: _____			_____

# E-Verify Initial Screen

**E-Verify**

Employment Eligibility Verification

On-line Resources

Tutorial

Home

Contact Us

Exit

**Case Administration**

- > Initial Verification
- > View Cases

**User Administration**

- > Change Password
- > Pwd Challenge Q&A
- > Change Profile

**Site Administration**

- > Add User
- > View Users
- > Maintain Company
- > Request Termination

**Reports**

- > View Reports

**Enter Employee Information from Form I-9:**

The employee attests to be (select one of the following):

- ☒ A citizen or national of the United States
- ☐ A Lawful Permanent Resident
- ☐ An alien authorized to work

Next

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U.S. Citizenship and Immigration Services

# Input employee documents provided

**E-Verify**

Employment Eligibility Verification

[On-line Resources](#) | [Tutorial](#) | [Home](#) | [Contact Us](#) | [Exit](#)

**Case Administration**

- > Initial Verification
- > View Cases

**User Administration**

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**Site Administration**

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- > Request Termination

**Reports**

- > View Reports

**Enter Employee Information from Form I-9:**

What document(s) did the employee present (select one):

- ☐ List B, C Documents (List B, C Documents)
- ☒ Unexpired or Expired U.S. Passport

Back

Next

[U.S. Department of Homeland Security](#) | [U.S. Citizenship and Immigration Services](#)

# Section 1: Info from I-9 Form

**E-Verify**

Employment Eligibility Verification

[On-line Resources](#) | [Tutorial](#) | [Home](#) | [Contact Us](#) | [Exit](#)

**Case Administration**

- > Initial Verification
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- > Change Password
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**Site Administration**

- > Add User
- > View Users
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- > Request Termination

**Reports**

- > View Reports

**Enter Employee Information from Form I-9:**

**Last Name:**

Jefferson

\*

?

**First Name:**

Thomas

\*

**Middle Initial:**

**Maiden Name:**

**Social Security Number:**

216-47-4401

\*

**Date of Birth:**  
(mm/dd/yyyy)

04/20/1962

\*

**Hire Date:**  
(mm/dd/yyyy)

03/26/2008

\*

?

**Employer Case ID:**

?

Back

Next

[U.S. Department of Homeland Security](#) | [U.S. Citizenship and Immigration Services](#)

## E-Verify: How it Works cont.

- Initial verification will return one of three results within seconds:
  - **Employment Authorized**
    - The employee is authorized to work
  - **SSA Tentative Non-confirmation**
    - There is an information mismatch with SSA
  - **DHS Verification in Process**
    - DHS will usually respond within 24 hours with either an Employment Authorized or DHS Tentative Nonconfirmation

# Initial Verification Approved

**E-Verify** Employment Eligibility Verification

On-line Resources | Tutorial | Home | Contact Us | Exit

Case Verification Number: 2008086123844GP

**Initial Verification**

Last Name: Jefferson First Name: Thomas  
 Middle Initial: Maiden Name:  
 Social Security Number: 216-47-4400 Date of Birth: 04/20/1962  
 Hire Date: 03/26/2008 Citizenship Status: Citizen or National of the United States  
 Alien Number: I-94 Number:  
 Document Type: Unexpired or Expired U.S. Passport Doc. Expiration Date:  
 Initiated By: ARAD1527 Initiated On: 03/26/2008

**Initial Verification Results**

Initial Eligibility: EMPLOYMENT AUTHORIZED

**Case Documents for Printing**

[Case Details](#)

[Resolve Case](#) [Close](#)

**Case Administration**

- Initial Verification
- View Cases

**User Administration**

- Change Password
- Pwd Challenge Q&A
- Change Profile

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**Reports**

- View Reports

**U.S. Department of Homeland Security | U.S. Citizenship and Immigration Services**

# E-Verify: Case Resolution

- If **Employment Authorized**, the employer records the system-generated verification number on the Form I-9. Client Services will not process a new hire if the verification number (CV#) is not noted on the I-9 Form.
- If **Tentative Non-confirmation**, the employee can contest the finding and then:
  - Social Security Number mismatches are resolved with SSA
  - Non-citizen status mismatches are resolved with DHS
- If the employee *chooses not to contest*, it is considered a **Final Non-confirmation**, and the Research Foundation terminates the employee and resolve the case.



## Tentative Non-confirmation (TNC)

- **Inform** the employee and **print and review** the TNC notice with the employee.
- The employee chooses to “**contest**” or “**not contest**” the TNC.
- **Refer** the employee to the appropriate agency if the TNC is contested.
- The employee has **8 Federal Government workdays** from the date of referral to visit or call the appropriate agency to resolve the discrepancy.

File Edit View Favorites Tools Help

Back Forward Search Favorites

Address <https://www.vis-dhs.com/WebBp/SSATentativeNonconfirmNotice.aspx?EmployeeName=jefferson%2c+thomas&EmployeeSsn=216-47-4401> Go Links SnagIt

**NOTICE TO EMPLOYEE OF TENTATIVE NONCONFIRMATION**

Employee Name: jefferson, thomas  
SSN: 216-47-4401  
Date of Tentative Nonconfirmation: 09/18/2007  
Agency Providing Tentative Nonconfirmation: Social Security Administration

If E-Verify result is Tentative NonConfirmation, this is the notice that must be printed and given to the employee. It must be filled by employee in your presence. You must attach a copy to the I-9 form.

This employer is participating in a pilot project with the Social Security Administration (SSA) and the Department of Homeland Security to verify employment eligibility information you provided when you completed the Form I-9. **When your information was compared electronically to government records, SSA could not confirm that you are eligible to work in the United States. This tentative nonconfirmation does not mean that you are not work authorized, or that the information you provided is incorrect. There are many reasons why a work authorized employee could be the subject of a tentative nonconfirmation. The tentative nonconfirmation means, however, that you must contact the SSA to resolve the situation if you wish to continue your employment.**

You have a voluntary choice. You may **Contest** the tentative nonconfirmation, or you may choose to **Not Contest** the tentative nonconfirmation.

If you **Contest** this tentative nonconfirmation, you must contact the SSA. By contesting, your employer will refer your case through E-Verify, and provide you with a referral notice that will tell you how to contact the SSA. You will be provided 8 Federal government work days from the date of that referral notice to resolve your situation with SSA. At the SSA office, you may have to provide additional information or documents that will permit the SSA to notify your employer that you are work authorized. During the 8 Federal government work days your employer may not terminate your employment or take adverse action against you based upon your employment eligibility status or because you have chosen to contest the tentative nonconfirmation.

If you do **Not Contest** the tentative nonconfirmation, you are making a choice voluntarily to give up your opportunity to correct the tentative nonconfirmation. If you do not contest the tentative nonconfirmation, it automatically becomes a final nonconfirmation. That means that your employer may terminate you immediately as an unauthorized employee. If you do not contest the tentative nonconfirmation, a legal presumption is created that your employer is in violation of the law if it continues your employment.

If you have questions or concerns about immigration-related unfair employment practices, you may call the Office of Special Counsel for Immigration-Related Unfair Employment Practices toll free at 1-800-255-7688 or 1-800-237-2515 (TDD) for the hearing impaired.

**I choose to (check one):**

☐ **Contest** the tentative nonconfirmation. I understand that I must contact the Social Security Administration within 8 Federal Government work days from the date shown on the referral notice which is to be provided by my employer.

☐ **Not Contest** the tentative nonconfirmation. I choose voluntarily to give up my opportunity to correct the tentative nonconfirmation. I understand that my voluntary choice not to contest the tentative nonconfirmation authorizes my employer to terminate my employment immediately.

Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_

**E-VERIFY  
NOTICE TO EMPLOYEE OF TENTATIVE NONCONFIRMATION**

**Employer's Certification**

I certify that this employer has received a tentative nonconfirmation relating to the employee whose name and signature appear above and that the employee has made the

Done Internet

# TNC Case Resolution

- **Employee continues to work** while the case is being resolved.
- The 8 days is only for the employee to contact the appropriate agency. Resolution may go beyond 8 days.
- Once the employee resolves the discrepancy in his or her records, they should inform the Office of Client Services.
- With both a **SSA TNC** and a **DHS TNC**, a response is electronically sent to the Research Foundation through the system. The employer should check E-Verify periodically for the response.

## TNC Case Resolution cont.

- The employer will receive one of three results:
  - **Employment Authorized**
  - **Final Nonconfirmation**
  - **Review and Update Employee Data then Resubmit**
- The employer then resolves the case in E-Verify.

# Employment Authorized

**E-Verify**

Employment Eligibility Verification

[On-line Resources](#) | 
 [Tutorial](#) | 
 [Home](#) | 
 [Contact Us](#) | 
 [Exit](#)

Case Verification Number: 2008086123844GP

Case Administration

- > Initial Verification
- > View Cases

User Administration

- > Change Password
- > Pwd Challenge Q&A
- > Change Profile

Site Administration

- > Add User
- > View Users
- > Maintain Company
- > Request Termination

Reports

- > View Reports

Initial Verification

<b>Last Name:</b>	Jefferson	<b>First Name:</b>	Thomas
<b>Middle Initial:</b>		<b>Maiden Name:</b>	
<b>Social Security Number:</b>	216-47-4400	<b>Date of Birth:</b>	04/20/1962
<b>Hire Date:</b>	03/26/2008	<b>Citizenship Status:</b>	Citizen or National of the United States
<b>Alien Number:</b>		<b>I-94 Number:</b>	
<b>Document Type:</b>	Unexpired or Expired U.S. Passport	<b>Doc. Expiration Date:</b>	
<b>Initiated By:</b>	ARAD1527	<b>Initiated On:</b>	03/26/2008

Initial Verification Results

<b>Initial Eligibility</b>	EMPLOYMENT AUTHORIZED
----------------------------	-----------------------

Enter Case Resolution

<b>Resolve Options:</b>	<input checked="" type="radio"/> Resolved Authorized <input type="radio"/> Resolved Unauthorized / Terminated <input type="radio"/> Self Terminated <input type="radio"/> Invalid Query <input type="radio"/> Employee Not Terminated
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# Photo Screening Tool

- The E-Verify photo tool enables employers to match the photo on an employee's Employment Authorization Document (EAD) I-766 or Permanent Resident Card ("green card") I-551 to the photo that USCIS has on file for that employee.
- Assist employers to detect instances of document fraud.

# Photo Screening Tool Sample

 **E-Verify**

*Employment Eligibility Verification*

[On-line Resources](#) | [Tutorial](#) | [Home](#) | [About](#) | [Exit](#)

**Case Administration**

- > Initial Verification
- > View Cases

**User Administration**

- > Change Password
- > Pwd Challenge Q&A
- > Change Profile

**Site Administration**

- > Add User
- > View Users
- > Maintain Company
- > Request Termination

**Reports**

- > View Reports

**Case Verification Number: 2007240160205MM**

**Identity Verification**

Does the photograph below match the photograph on the I-766 document provided by the employee?

☐ Yes

☐ No

☐ Cannot be determined (specify why)



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## PI/PD/Administrator Responsibilities

- E-Verify **must ONLY be used to verify NEW hires**, and must be initiated after the employee accepts the position (hire date) and within 3 days of the employee's actual start date.
- E-Verify procedures **must be applied to ALL new hires**, regardless of citizenship status.

# E-Verify Poster

## This Employer Participates in E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

**IMPORTANT:** If the Government cannot confirm that you are authorized to work, this employer is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.


Employers may not use E-Verify to pre-screen job applicants or to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo screening tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS) photograph.



If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 1-800-255-7688 (TDD: 1-800-237-2515).

**NOTICE:**

Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.

Employment Verification.  Done.


For more information on E-Verify, please contact DHS at:  
**1-888-464-4218**



E-VERIFY IS A SERVICE OF DHS AND SSA

# OSC Anti-Discrimination Poster

**IF YOU HAVE THE RIGHT TO WORK,  
Don't let anyone take it away.**



**If you have a legal right to work in the United States, there are laws to protect you against discrimination in the workplace.**

**You should know that –**

No employer can deny you a job or fire you because of your national origin or citizenship status.

In most cases employers cannot require you to be a U.S. citizen or permanent resident or refuse any legally acceptable documents.

If any of these things have happened to you, you may have a valid charge of discrimination that can be filed with the OSC. Contact the OSC for assistance in your own language.


Call 1-800-255-7688, TDD for the hearing impaired is 1-800-237-2515.

In the Washington, D.C., area, please call 202-616-5594, TDD 202-616-5525

Or write to:  
U.S. Department of Justice  
Office of Special Counsel - NYA  
950 Pennsylvania Ave., N.W.  
Washington, DC 20530

**U.S. Department of Justice  
Civil Rights Division**

Office of Special Counsel for  
Immigration-Related Unfair  
Employment Practices



# Employee Rights

- The employee has the right to contest or not to contest a Tentative Non-confirmation (TNC) from SSA or DHS.

## Related/Contact Information

- [Right to Work Poster](#)
- [E-Verify Poster Notice](#)
- [RFCUNY website](#)
- [E-Verify User Manual](#)
- [E-Verify: DOs and DON'Ts](#)
- [Office of Client Service](#)