PAYROLL & WORK AUTHORIZATION COMPLIANCE TRACKER

Employment Eligibility Verification Integration

Employer Name: _____ **FEIN:** _____

Prepared By: _____ **Review Date:** _____

1. EMPLOYEE INFORMATION

Full Legal Name:

Employee ID / Payroll ID:

Social Security Number:

Date of Birth:

Hire Date:

E-mail Address:

2. FORM I-9 & WORK AUTHORIZATION STATUS

Citizenship/Attestation Status:

- ☐ A citizen of the United States
- ☐ A noncitizen national of the United States
- ☐ A lawful permanent resident
- ☐ An alien authorized to work

Verification Category	Document Title	Document Number	Expiration Date
List A (Identity & Auth)			
OR List B (Identity)			
AND List C (Employment Auth)			

I-9 Completion Date:

Re-verification Date (if applicable):

3. E-VERIFY SYSTEM & PAYROLL INTEGRATION

E-Verify Case Number:

E-Verify Verification Date:

E-Verify Results/Status:

- ☐ Employment Authorized
- ☐ Tentative Nonconfirmation (TNC)
- ☐ Case In Continuation
- ☐ Final Nonconfirmation

Federal W-4 Completed:

- ☐ Yes
- ☐ No

State Tax Form Completed:

- ☐ Yes
- ☐ No

Payroll Setup Completed By:

_____

Payroll Integration Date:

_____

4. COMPLIANCE SIGNATURES & APPROVALS

By signing below, the authorized representatives certify that the employment eligibility verification has been completed in compliance with the Immigration Reform and Control Act of 1986 (IRCA) and that the payroll system has been updated accordingly.

_____

HR Representative / Verifying Officer Signature

_____

Printed Name

Date

Payroll Administrator Signature

_____

Printed Name

Date