

Office Best Practices

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Employee Files

- For ADA compliance purposes, all employee files should be kept in a **secure** cabinet at all times.
- I-9 forms should be kept together in a **separate file**.
- Medical files (FMLA, benefits, etc.) should be kept in a separate **locking** file cabinet.
- Have **1-2 designated** persons that can access employee personnel files.

Employee Files– Personnel Files

The Employee Personnel File should contain the following information:

- Application/Resume
- All documents pertaining to hiring information such as background checks, reference checks, work history information, etc.
- W-4 form
- Promotion/transfer records
- Performance evaluations
- Disciplinary records
- Personal commendations
- Vacation/PTO days
- Pay records

Employee Files– Personnel Files

When an employee is terminated the following records should be added to their Personnel File:

- Exit interview form
- Copy of the State Separation Notice
- Layoff information – selection process
- Firing for cause information
- Resignation letter

Employee Files– Benefit Files

The Employee Benefit File should contain the following information:

- All medical information including doctors' statements
- Benefit enrollment forms
- 401(k) enrollment forms and documentation
- Change forms and/or waiver forms
- Workers' compensation information including injury reports
- Beneficiary designations
- Drug test results

Employee Files– Benefit Files

- Benefits information is to be kept in strict confidence and access should be extremely limited to those individuals who have a recognized need for such information.
- Even inadvertent or accidental disclosure of information can result in legal liability for employers.
- Written consent from employees should be required for medical information disclosures.

Form I-9 and E-Verify



Form I-9

- Determines an individual's authorization to work in the United States.
- Cannot be completed until after an offer of employment has been accepted.
- Form I-9 has two sections.
 - Section 1 must be completed by the employee.
 - Section 2 must be completed by the employer.

Form I-9

- Penalties for incomplete or missing forms.
 - Range from \$110 to \$1,100 per violation or form.
 - Could be issued for failure to produce a Form I-9.
- Forms must be retained for terminated employees.
 - 1 year from date of termination or 3 years from date of hire, whichever is later.

Form I-9 – Section 1



Employment Eligibility Verification
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-9
OMB No. 1615-0047
Expires 10/31/2022

► **START HERE:** Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

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.

Section 1. Employee Information and Attestation *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Last Name <i>(Family Name)</i>		First Name <i>(Given Name)</i>		Middle Initial	Other Last Names Used <i>(if any)</i>		
Address <i>(Street Number and Name)</i>			Apt. Number	City or Town		State	ZIP Code
Date of Birth <i>(mm/dd/yyyy)</i>	U.S. Social Security Number □□□□ - □□ - □□□□		Employee's E-mail Address			Employee's Telephone Number	

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 boxes):

Although every effort has been made to provide a complete and compliant review and presentation, The General Council on Finance and Administration does not provide legal advice.

Form I-9 – Section 1

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

<input type="checkbox"/> 1. A citizen of the United States	
<input type="checkbox"/> 2. A noncitizen national of the United States <i>(See instructions)</i>	
<input type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____	
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____ Some aliens may write "N/A" in the expiration date field. <i>(See instructions)</i>	QR Code - Section 1 Do Not Write In This Space
<i>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.</i>	
1. Alien Registration Number/USCIS Number: _____ OR	
2. Form I-94 Admission Number: _____ OR	
3. Foreign Passport Number: _____ Country of Issuance: _____	
Signature of Employee	Today's Date (mm/dd/yyyy)

Form I-9 – Section 1

Preparer and/or Translator Certification (check one):

I did not use a preparer or translator. A preparer(s) and/or translator(s) assisted the employee in completing Section 1.

(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator		Today's Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)	City or Town	State	ZIP Code

Form I-9 – Section 2



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
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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)
Document Title		Additional Information		QR Code - Sections 2 & 3 Do Not Write In This Space
Issuing Authority				
Document Number				
Expiration Date (if any) (mm/dd/yyyy)				
Document Title				
Issuing Authority				
Document Number				
Expiration Date (if any) (mm/dd/yyyy)				

Form I-9 – Section 2 Documents

- Employee must provide required documents within 3 business days after date of hire.
 - For example: If an employee is hired on Monday, they must provide forms by end of day Thursday.
- You **cannot** require employees to bring certain documents and cannot ask them to bring in **more** than what is required.
 - If they bring in more on their own, do not document, or make copies of them!
- Documents cannot be expired.
- Copies of documents must be legible.

Form I-9 – Section 2

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*): _____ (See instructions for exemptions)

Signature of Employer or Authorized Representative		Today's Date (<i>mm/dd/yyyy</i>)	Title of Employer or Authorized Representative	
Last Name of Employer or Authorized Representative	First Name of Employer or Authorized Representative		Employer's Business or Organization Name	
Employer's Business or Organization Address (<i>Street Number and Name</i>)		City or Town	State	ZIP Code

E-Verify

- Web based system that allows employers to confirm the eligibility of their employees to work in the United States.
- You may not verify current employees, only those newly hired.
- Requirements to enroll are based on state.

States that Require E-Verify

Alabama	Arizona	Colorado	Florida	Georgia
Idaho	Indiana	Louisiana	Nebraska	North Carolina
Oklahoma	Pennsylvania	South Carolina	Tennessee	Texas
Utah	Virginia	West Virginia	Mississippi	Missouri

E-Verify

E-Verify is voluntary, on the federal level but many states have enacted state laws requiring employers to enroll.

<https://www.e-verify.gov/employers>

EMPLOYERS

This section provides information for employers and other participants about the verification process, including detailed instructions on handling an employee's Tentative Nonconfirmation and other related topics.

For the latest about E-Verify, check out [What's New](#).

To stay up-to-date, [subscribe to E-Verify emails via GovDelivery](#).

If you are not already enrolled in E-Verify, [explore the program](#) and what it can do for your business, then [learn how to enroll](#).

Login to E-Verify

If you are already enrolled in E-Verify and would like to **login** now.

LOGIN TO E-VERIFY



ENROLLING IN E-VERIFY

Begin your E-Verify enrollment here

E-VERIFY ENROLLMENT



VERIFICATION PROCESS

Create a case, get results and close the case

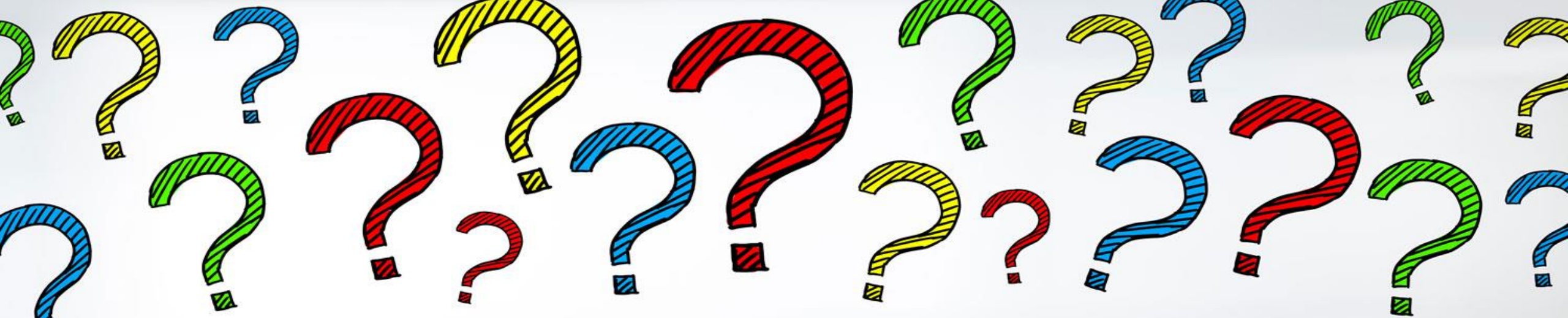
VERIFICATION PROCESS



MONITORING & COMPLIANCE

E-Verify compliance activities

MONITORING & COMPLIANCE



UMC
SUPPORT

UMC SUPPORT



FINANCE & ADMINISTRATION

General Council on Finance and Administration

THE UNITED METHODIST CHURCH

*thank
you*



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