How To Prepare Your Business & Protect Your Employees

Rights and Responsibilities



The Tools we know DHS has (we expect development of new regulations, policies and procedures for immigration enforcement)

I-9 Audits:

- ICE will request to review an employer's I-9 Forms (Employment Verification Form)
- Employer will generally face fines and sometimes required to enroll in E-Verify

Worksite Raids:

• ICE will generally arrive at worksite(s) unannounced to detain and arrest individuals they suspect are present in the U.S. without authorization



Social Security No-Match Letters

BACKGROUND: The Social Security Administration (SSA) will likely be reviving the practice of issuing "No-Match" letters to employers notifying them that the employment records provided by the employer for an employee does not match the SSA's records.

EMPLOYERS SHOULD NOT:

Take adverse action against an employee simply for receiving a no-match letter from the IRS. An employer could be liable for employment, labor law, and civil rights violations;

Any employer that uses the failure of the information to match SSA records to take inappropriate adverse action against a worker may violate State or Federal law;

The information you receive from SSA mismatch records does not make any statement regarding a worker's immigration status.



Consequences of Being Non-Compliant

- MONETARY PENALTIES (Subject to Change)
 - Knowingly Hire and Continuing to Employ violation:
 - Substantive and Uncorrected violation:
 - Subsequent offenses range:

\$676-\$5,404/per violation \$272-\$2,701/per violation \$5,404-\$27,018/per violation

- DEBARMENT
 - Knowingly Hire and Continuing to Employ: *Employer is prevented from participating in future federal contracts and receiving other government benefits*
- CRIMINAL PENALTIES pattern of hiring unauthorized workers
- MITIGATING FACTORS [+/- 5% to 25%]
 - Business Size
 - Good Faith
 - Seriousness
 - Unauthorized [employees]
 - History
 - Cumulative Adjustment



Employers

- Conduct a self-audit of your I-9s to correct any errors and dispose of I-9s that you are no longer required to keep
- 2. Create an ICE raid action plan for your managers/leaders and employees
- **3.** Provide a Know Your Rights Presentation to your staff and employees
- **4.** Find an immigration employment attorney you have access to in the event of enforcement



IMPORTANT

The following content is NOT legal advice.

Every case is different, so please be sure to consult with a qualified attorney regarding your own case.



What Employers and Employees Should Know - I-9 and Audits



Audits

1. REMEMBER: You don't have to hand over requested documents immediately

Employers have up to 72 hours to hand-over requested documents This is the current regulation, but we could see this timeframe change in the new administration

- 2. Contact your employment-immigration attorney immediately
- 3. Only turn over the files requested
- **1**. Make copies of documents before handing them over to ICE
- 1. Get rid of old I-9s (must keep I-9s for one year after employment ENDS or 3 years after start)



How to Correctly Fill out Form I-9s

Section 1: EMPLOYEE

| Last Name (Family Name) First Name Doe John Address (Street Number and Name) 123 Main St. | | Apt. Number (if any) City or Tow | | Middle Initial (if any) | | Other Last Names Used (if any) | | | | |
|--|-----------------|--|--|----------------------------|--|---|----------|--------------|--|--|
| | | | | City or Town Washington | | State ZIP Code DC 💌 00000 | | | | |
| Date of Birth (mm/dd/yyyy) 01/01/2000 | | cial Security Number Employee's Email Address 3 4 5 6 7 8 9 employee@email.com | | | | Employee's Telephone Number (123) 123-1234 | | | | |
| tines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box | | zen of the United States ncitizen national of the United States (See Instructions.) vful permanent resident (Enter USCIS or A-Number.) ncitizen (other than Item Numbers 2. and 3. above) authorized to work until (exp. date, if any) em Number 4., enter one of these: Number 1 Form I-94 Admission Number Foreign Passport Number and Country of Issuan | | | | | | | | |
| | A 6 9 C 60 C 20 | | | OR | | OR | <u> </u> | | | |
| correct. Signature of Employee | | | | | | Todav's | Date (| (mm/dd/yyyy) | | |

If a preparer and/or translator assisted you in completing Section 1, that person MUST complete the Preparer and/or Translator Certification on Page 3.

- Make sure the employee completes Section 1 on or before his/her first day of work for pay manager/employer should not fill in this section.
- Always double check to make sure all required items are filled in, and that the employee SIGNS and DATES (Date should be first day of work for pay).

Section 2: EMPLOYER/MANAGER

| | List A | OR | List B | AND | | List C |
|--|------------------------|-----|---|-------------------------|--------------------|--------------------------|
| Document Title 1 | US Passport | | | | | |
| Issuing Authority | US Department of State | | | | | |
| Document Number (if any) | 123456789 | | | | | |
| Expiration Date (if any) | 01/01/2030 | | | | | |
| Document Title 2 (if any) | | Add | itional Information | | | |
| Issuing Authority | | | | | | |
| Document Number (if any) | | | | | | |
| Expiration Date (if any) | | | | | | |
| Document Title 3 (if any) | | | | | | |
| Issuing Authority | | | | | | |
| Document Number (if any) | | | | | | |
| Expiration Date (if any) | | | heck here if you used an alterna | tive procedure authoriz | ed by DH | S to examine documents. |
| Certification: I attest, under penalty of perjury, that (1) I have exami employee, (2) the above-listed documentation appears to be genuin- best of my knowledge, the employee is authorized to work in the Un | | | led the documentation presented by the above-hamed | | First Da (mm/dd | y of Employment |
| | | | e and to relate to the employee named, and (3) to the | | | 1/15/2024 |
| Last Name, First Name and Title of Employer or Authorized Representati | | | ve Signature of Employer or Authorized Representative | | | Today's Date (mm/dd/yyyy |
| Doe, Jane HR Manager at ABC Manufacturing | | | Jane Doe | | | 11/15/20204 |

For reverification or rehire, complete Supplement B, Reverification and Rehire on Page 4.

- Employer or manager completes within 3 days of employee's first day of work for pay
- Double check to make sure all required items are filled in
- Make sure that information about the employee is consistent with the information in Section 1.
- Make sure information in Section 2 about employee's identity and employment authorization is consistent with the documents s/he provided to you you must review the original identity and work authorization documents.

Supplement A - If a Translator/Preparer was Used

| Last Name (Family Name) from Section 1. | First Name (Given Name) from Section 1. | Middle initial (if any) from Section 1. |
|---|---|---|
| Doe | John | A |

Instructions: This supplement must be completed by any preparer and/or translator who assists an employee in completing Section 1 of Form I-9. The preparer and/or translator must enter the employee's name in the spaces provided above. Each preparer or translator must complete, sign, and date a separate certification area. Employers must retain completed supplement sheets with the employee's completed Form I-9.

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 Jennifer Bilingual | | | Date (mr | Date (mm/dd/yyyy) | | |
|--|-----|-----------------------------|------------|-------------------|-------------------------------------|--|
| | | | 11/15/2025 | | | |
| Last Name <i>(Family Name)</i> Bilingual | 120 | Name (Given Name) Inifer | | | Middle Initial <i>(if any)</i> T | |
| Address (Street Number and Name) 123 Language Blvd | | City or Town Washington | | State DC | ZIP Code 00000 | |

- Employer or manager should complete Section 3 when employee's employment authorization documentation has expired.
- If the employment authorization documentation has expired, ask the employee to present an unexpired List A or List C document.
 - You do not need to reverify an employee's List B (identity) document.

Supplement B - Reverification or Rehire

| Date of Rehire (if applicable) | New Name (if applicable) | | 10 | | |
|---|------------------------------|--|---|--|--|
| Date (mm/dd/yyyy) 12/25/2024 | Last Name (Family Name) | Fir | st Name (Given Name) | Middle Initial | |
| | | our employee can choose to pres nt information in the spaces belo | ent any acceptable List A or List C w. | documentation to show | |
| Document Title Employment Autho | rization Document | Document Number (if any) 123456789 | | Expiration Date (if any) (mm/dd/yyyy) 01/01/2026 | |
| | | | is authorized to work in the Unit genuine and to relate to the ind | | |
| Name of Employer or Authorized Representative | | Signature of Employer or Authoriz | ed Representative | Today's Date (mm/dd/yyyy) | |
| Jane Doe | | Jane Doe | | 12/25/2024 | |
| Additional Information (Init | ial and date each notation.) | | | Check here if you used an Iternative procedure authorized by DHS to examine documents. | |

- Employer or manager should complete Section 3 when employee's employment authorization documentation has expired
 - This would include a returning hire or a rehire of someone on a new visa (H2A, H2B, etc.)
- If the employment authorization documentation has expired, ask the employee to present an unexpired List A or List C document.
 - You do not need to reverify an employee's List B (identity) document.

Correcting Form I-9s

Section 1 (Employee) Errors

- Ask employee to correct Section 1 errors
- To correct the form:
 - Draw a line through the incorrect information.
 - Enter the correct information.
 - Initial and date the correction.

Section 2 (Employer) Errors

- Correct on current form I-9 (cross out, initial and date) or print and complete a new Section 2 (initial and date), and staple it to the original I-9 form.
 - You may complete an entire new I-9, but it is not required.

• DO NOT USE CORRECTING FLUID/WHITE OUT TO MAKE CHANGES.

• If you changed an I-9 using correction fluid, attach a signed and dated note to the corrected I-9 explaining what happened.



What Employers and Employees Should Know - ICE Raid



Worksite Raid

- 1. Confirm whether ICE has the legal authority to enter your premises (Judicial vs. Administrative Warrant)
- 1. Only a designated point person should communicate with ICE. Have a point person per site and per shift
- 2. Document everything including the names & badge nos. of the ICE agents
- 3. Advise employees to remain calm and that they should exercise their right to remain silent and direct questions to the point person for any question related to the investigation



Worksite Raid

- 1. Do not immediately hand over any documents requested by ICE
- 2. DO NOT LIE or interfere with ICE activities but you DO NOT give them access to non public areas if you are not presented with a warrant to search that specific area
- 3. For third party worksites (ex. contractors at another business) make it clear to officers this is not your primary worksite and direct them to your company's management or ownership for documents or inquiries

Know the Difference: ICE (Administrative) vs. Judicial Warrant

ICE Administrative Warrant -NOT REQUIRED to open door

U.S. Department of Justice

Immigration and Customs Enforcement Warrant of Removal/Deportation

> File No: Date:

To any officer of the United States Immigration and Customs Enforcement:

(Full name of alien)

Who entered the Unites States at on (Place of entry) (Date of entry)

Is subject to removal/deportation from the United States, based upon a final order by

An immigration judge in exclusion, deportation, or removal proceedings

A district director or district director's designated official

The Board of Immigration Appeals

A United States District or Magistrate Court Judge

And pursuant to the following provisions of the Immigration and Nationality Act: Section 241 (a) (5) of the Immigration and Nationality Act (Ace), as amended

I, the undersigned officer of the United States, by virtue of the power and authority vested in the Attorney General under the laws of the United States and by his or her direction command you to take into custody and remove from the United States the above-named alien. pursuant to law at the expense of the appropriation. "Salaries and Expenses Immigration and Customs Enforcement " including the expense of an attendant if necessary.

(Signature of ICE Official)

(Title of ICE Official)

(Date and Office Location

Warrant Signed by Judge-**REQUIRED** to open door

| UNITED STATES D DISTRICT OF | |
|--|---|
| United States of America, Plaintiff, V. | CIVIL NO. 06m 3457 JSM |
| The Fremises Known As, Swift & Company, located at 1700 Righway 60 NE, Worthington, Minnesota, and all its appurtenances, parking areas and outdoor working areas | ORDER FOR WARKANT FOR ENTRY ON PREMISES TO SEARCH FOR ALLENS WHO ARE IN THE UNITED STATES WITHOUT LEGAL AUTHORITY |
| Defendant. | Name & Address |

The United States of America, having filed an application to authorize officers of United States Immigration and Customs without legal authority and, if any such persons are found on the premises, to exercise their authority pursuant to section 287 of the Immigration and Nationality Act, 8 U.S.C. § 1357, to question them to determine whether they are such aliens and, if there is probable cause to believe they are such aliens, to arrest them.

IT IS FURTHER ORDERED that U.S. Immigration and Customs Enforcement shall conduct the entry and search during daylight hours with ten (10) days of the issuance of this warrant, and make its return to this Court with ten (10) days of the date the entry and search have been completed.

Dated: December 0 , 2006

DATE

NIE S. MAYERON nited States Magistrate Judge

The Point Person

- One per shift and per site
- Responsible for communication:
 - with the investigating officers
- Responsible for confirming whether ICE has the authority to enter the premises and the scope of the warrant
- Responsible for following ICE for the entire visit and taking notes (agent names or badge numbers)

Your Action Plan

YOU HAVE THE RIGHT TO:

- Not open the door if ICE does not have a warrant signed by a judge
- Not hand over an employee that ICE asks for if ICE does not have a warrant signed by a judge with the employee's name on it
- Speak with and be represented by an attorney
- Not answer questions or sign paperwork before consulting with your attorney
- Review your I-9s for 72 hours before handing them over to ICE
- To ask the agents to identify themselves either with a name or a badge number



What Employees Should Know -Know Your Rights

Check with your managers if this training would be valuable for your workforce. Especially for higher risk industries, it is best to keep your employees informed!



IMPORTANT

The following content is NOT legal advice.

Every case is different, so please be sure to consult with a qualified attorney regarding your own case.



Employee Rights

- 1. Right to remain silent But it must be expressed
- 2. Employees don't have to answer any questions about their immigration status, nationality, place of birth, etc
- **3.** Right to an attorney
- 4. Employees may refuse to present any documents or identification that identifies or discloses their place of birth or country of nationality
- **5**. Right to see an immigration judge if never been order removed/deported from the U.S.



Tips to Consider

- 1. Remain calm do not run away from worksite
- 2. DO NOT lie to ICE agents
- **3**. Seek individual consultations with trusted immigration attorneys
- 4. Ask your employer to provide/facilitate a Know Your Rights training



Questions?



Next Steps - Call to Action

- If you are interested in future trainings, or being involved in advocacy efforts:
 - Scan this QR Code
 - Contact me for more information:
 - joneill@americanbic.biz
 - **630.881.8034**

