



REMOTE HIRE NOTICE

EMPLOYEE INFORMATION (TO BE COMPLETED BY DEPARTMENT)

Last Name		First Name	M.I.
Phone	Email		
Employee's Date of Hire			
/ / (THIS DATE MUST BE ENTERED INTO THE CERTIFICATION SECTION OF THE FORM I-9)			

AGENT/REPRESENTATIVE INFORMATION (TO BE COMPLETED BY HUMAN RESOURCES)

Designee's Name				
Organization				
Address	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

Minnesota State University, Mankato hereby authorizes the above designee to act as our agent/representative for purposes of completing the Form I-9 for the employee named in section one of this form. This authorizes the above designee to sign on the Form I-9 as the employer, after they have reviewed and approved the appropriate documentation verifying employment eligibility.

Human Resources Signature Date

Title Phone

IF YOU ARE A NOTARY: PLACE NOTARY SEAL BELOW OR ATTACH A NOTARY CERTIFICATE.

NOTE: THIS FORM MUST BE COMPLETED AND GIVEN TO THE AUTHORIZED AGENT BEFORE THE FORM I-9 IS COMPLETED. THIS WILL ENSURE THAT THE HIRE DATE LISTED ON THE FORM IS PROVIDED AND VERIFIED BY THE HIRING DEPARTMENT.