



# AGENT AUTHORIZATION FORM

## PART 1

### APPLICATION - TO BE COMPLETED BY THE AGENT

I am applying to act as the agent for Wayne State University ("WSU") for the purpose of examining and accurately recording the information on the original documentation and any other information, required to complete Section 2 of the Employment Eligibility Verification I-9 Form for \_\_\_\_\_ ("Employee"), who

**Employee's Name**

has accepted employment at WSU. By signing below, I certify that I have received the appropriate training to complete Employment Eligibility Verification I-9 Forms and/or that I process Employment Eligibility Verification Forms I-9 as a regular part of my job. **I further represent that I am one of the following:**

- a Human Resources professional at the employee's home institution;
- a staff member in an International Center office at the employee's home institution;
- an attorney
- a notary public. **IMPORTANT:** if notary, please place the notary seal at the bottom of the **AGENT AUTHORIZATION** form **and** attach a notary certificate to the documents being notarized.

Agent hereby accepts such appoint.

Applicant - Print Name: \_\_\_\_\_

Applicant - Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**IMPORTANT:** If notary, please place your notary seal below or attach a notary certificate to the documents being notarized.

## PART 2

### AGENCY AGREEMENT - TO BE COMPLETED BY WSU REPRESENTATIVE

Wayne State University ("WSU") by \_\_\_\_\_, its \_\_\_\_\_

**Name of WSU Representative**

**Title**

hereby appoints \_\_\_\_\_ ("Agent"), and Agent hereby accepts such appointment

**Name of Agent**

to serve as WSU's agent solely for the purpose of examining and accurately recording the information on the original documentation and any other information, required to complete Section 2 of the Employment Eligibility Verification Form I-9 for Employee.

**WAYNE STATE UNIVERSITY**

**AGENT**

By: \_\_\_\_\_

\_\_\_\_\_

Its: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_