

DHS Privacy Notice

AUTHORITIES: The information requested on this survey is collected under 6 U.S.C. 271 and the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Public Law 104-208, Sec. 401-405 (Sept. 30, 1996), as amended and codified at 8 U.S.C. 1324a note.

PURPOSE: The primary purpose for providing the requested information on this survey is assist USCIS with determining whether: (1) new and revised questions for the E-Verify National Survey of Employers are clear and easy to answer; (2) questions convey the intended meaning; (3) information requested is available; and (4) questions require an excessive amount of time to complete.

DISCLOSURE: The information you provide is voluntary.

ROUTINE USES: Westat, the authorized contractor acting on behalf of USCIS, may share an overall summary of the responses you provide on this survey with USCIS. However, there are procedures to protect the confidentiality of employer respondents' individual survey responses. DHS follows approved routine uses described in the associated published system of records notice [DHS/USCIS-011 E-Verify Program] and the published privacy impact assessment [DHS/USCIS/PIA-030 E-Verify] which you can find at www.dhs.gov/privacy.

Paperwork Reduction Action Statement

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 40 minutes per response, including the time for reviewing instructions, and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Research and Evaluation Division, Office of Policy and Strategy, 20 Massachusetts Avenue, N.W., Washington, DC 20529-2210. OMB No. 1615-0126. **Do not return the completed form to this address.**

Pretest Draft of 2018 Survey for (a) Employers registered to verify their own workers via E-Verify website and (b) EEAs Verifying Only Their Own Workers

(Attachment A-1)

NOTE TO PROGRAMMER: After first few questions to determine company and respondent eligibility, employers will be routed to separate survey questions for (a) EEAs that verify clients' workers or (b) clients of EEAs. Remaining employers in this base survey will include regular employers and EEAs verifying only their own workers in the past 12 months.

November 6, 2017

SECTION A: Contact and Company Background Information

(ALL EMPLOYERS)

A1. Please enter any corrections to the company address information listed below.

[MOST RECENT COMPANY INFORMATION IS DISPLAYED BELOW]

Company name: _____

Address: STREET _____

CITY _____ STATE ____ ZIPCODE _____

(ALL EMPLOYERS)

A2. This survey is designed to be completed by the person in your company who is most knowledgeable about your entire company's use of E-Verify. That person could be located at any company office and could operate as part of your company's human resources, security, or other services.

The following information was provided for the person who would be most appropriate to respond to this survey.

[MOST RECENT CONTACT INFORMATION IS DISPLAYED BELOW]

FIRST NAME _____ LAST NAME _____

JOB TITLE _____

Is this the correct person to respond to the survey?

(Please choose only one response)

- 1 Yes..... **SKIP TO A4**
- 2 No..... **ANSWER A3**
- 3 Don't know..... **ANSWER A3**

[IF A2 = '1' THEN SKIP TO A4]

[ALL OTHERS, INCLUDING A2 = 'BLANK' ASK A3]

(ALL EMPLOYERS IF NOT THE CORRECT CONTACT PERSON)

A3. Please provide the contact information for the person at your company who could best answer our questions about hiring and work- authorization procedures. Westat staff will only use this information to contact the person if needed.

[NEW PERSON'S CONTACT INFORMATION]

FIRST NAME _____ LAST NAME _____

JOB TITLE _____

FULL PHONE _____ - _____ - _____ Extension _____

EMAIL _____

SKIP TO QUESTION A5.

(ALL EMPLOYERS IF CORRECT CONTACT PERSON)

A4. Please review the contact information provided below and enter any corrections.

[MOST RECENT CONTACT INFORMATION IS DISPLAYED BELOW]

FIRST NAME _____ LAST NAME _____

JOB TITLE _____

FULL PHONE _____ - _____ - _____ Extension _____

EMAIL _____

[ADD PROGRAMMER NOTE FOR SURVEY MANAGEMENT SYSTEM]:

(ALL COMPANIES)

A5. Is your company an E-Verify Employer Agent; i.e., a company that uses E-Verify to verify their clients' workers? An E-Verify Employer Agent used to be called a Designated Agent or DA.

(Please choose only one response)

- 1 Yes..... **SKIP TO A7**
- 2 No..... **ANSWER A6**
- 3 Don't know..... **(SHOW MESSAGE ABOUT FOLLOWUP AND EXIT SURVEY)**

(ALL COMPANIES)

A6. Does your company have an E-Verify Employer Agent; i.e., another company that uses E-Verify to verify your workers' employment eligibility?

(Please choose only one response)

- 1 Yes..... **ROUTE TO EEA CLIENT SURVEY**
- 2 No..... **ANSWER A7**
- 3 Don't know..... **(SHOW MESSAGE ABOUT FOLLOWUP AND EXIT SURVEY)**

(ALL COMPANIES EXCEPT EEA CLIENTS)

A7. Which one of the following statements best describes your company’s use of E-Verify?

Note: Your answer here will determine which questions you will be asked as you go through the rest of this survey.

(Please choose only one response)

- 1 This company has never used E-Verify **(ANSWER A8 AND EXIT SURVEY)**
- 2 This company has used E-Verify but has decided to no longer use it **(ANSWER A8 AND EXIT SURVEY)**
- 3 This company has used E-Verify and plans to continue using it in the future **(SKIP TO A9)**

(EMPLOYERS NOT CURRENTLY USING E-VERIFY)

A8. Why isn’t your company currently using E-Verify?

(Please choose one response for each item)

| | Yes | No | Don't Know |
|--|--------------------------|--------------------------|--------------------------|
| a. The person who originally wanted to use E-Verify has left the company | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. We decided it would be too burdensome to use the system | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. We decided that there was a better way to improve our verification process | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. We have had no new hires in the past year | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Using E-Verify would reduce our number of job applicants | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Using E-Verify would result in the loss of some existing employees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Using E-Verify would damage the employee/management relationship | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Using E-Verify would make us less competitive in the market place | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. The financial costs of using E-Verify outweigh the benefits of using it | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. We are a Web Services software provider ONLY; that is, we develop and sell software for other companies but do not verify workers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Other (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

END SURVEY AND SHOW THIS MESSAGE:

“Thank you for your input. The remaining questions in this survey are for employers that currently use E-Verify. If you have any questions, please contact our study team at [insert project Help Desk#] or [insert project mailbox email].”

(CURRENT USERS IDENTIFIED AS EEAs)

| | |
|---|--|
| <p>A9. Please indicate whether your company has used E-Verify for your own workers or your clients' workers in the past 12 months. (Please choose only one response)</p> | |
| 1 <input type="checkbox"/> | This company has used E-Verify for its own workers only (ASK A10) |
| 2 <input type="checkbox"/> | This company has used E-Verify for its clients' workers only (SHOW MESSAGE AND ROUTE TO SURVEY FOR EEAs VERIFYING CLIENTS WORKERS ONLY) |
| 3 <input type="checkbox"/> | This company has used E-Verify for both its own workers and clients' workers (SHOW MESSAGE AND ROUTE TO DUAL EEA SURVEY) |

(CURRENT EEAs NOT VERIFYING CLIENTS' WORKERS IN PAST 12 MONTHS)

| A10. Why is your company not verifying clients' workers? (Please choose one response for each item) | | Yes | No |
|---|--|--------------------------|--------------------------|
| a. | We registered as an E-Verify Employer Agent but decided not to verify other companies' workers | <input type="checkbox"/> | <input type="checkbox"/> |
| b. | We used to have clients but no longer have them | <input type="checkbox"/> | <input type="checkbox"/> |
| c. | We have clients but did not verify any of their workers within the past year | <input type="checkbox"/> | <input type="checkbox"/> |
| d. | Other (Specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS ONLY—INCLUDING EEAs VERIFYING ONLY OWN WORKERS IN PAST 12 MONTHS)

| A11. Does your company access the E-Verify website in the following ways? (Please choose one response for each item) | | Yes | No |
|---|--|--------------------------|--------------------------|
| a. | We go directly to the E-Verify website ((https://e-verify.uscis.gov/web/Login.aspx) to use E-Verify) | <input type="checkbox"/> | <input type="checkbox"/> |
| b. | We have customized software (e.g., a human resource software system) for using E-Verify | <input type="checkbox"/> | <input type="checkbox"/> |

(WEB SERVICES USING BOTH BROWSER AND SOFTWARE)

| A12. Does your company access the E-Verify website at least sometimes to perform the following E-Verify tasks? (Please choose one response for each item) | Yes | No |
|--|--------------------------|--------------------------|
| a. Create E-Verify cases for employees | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Conduct Photo Matching | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Respond to requests to “Check Information” | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Process Tentative Nonconfirmations | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Conduct the referral process for DHS or SSA Tentative Nonconfirmations | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Close cases | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Other (Specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> |

(NON-EAs VERIFYING OWN WORKERS)

| A13. Do the following statements describe your company? (Please choose one response for each item) | Yes | No |
|--|--------------------------|--------------------------|
| a. This company provides workers on <u>our payroll</u> to work at our clients’ sites (e.g., our company is a Temporary Staffing agency) | <input type="checkbox"/> | <input type="checkbox"/> |
| b. This company refers job candidates for permanent placement to potential employers who may hire and pay them (e.g., our company is a Placement or Recruiting firm) | <input type="checkbox"/> | <input type="checkbox"/> |

(NON-EAs VERIFYING OWN WORKERS ONLY)

A14. Which description below best fits your company?

(Please choose only one response)

- 1 Company with a single location
- 2 Company with offices or branches at multiple locations
- 3 Don’t know

(NON-EAs WITH MULTIPLE LOCATIONS)

A15. Which of the following best describes how your company uses E-Verify?

(Please choose only one response)

- 1 Headquarters handles all E-Verify submissions for all locations (i.e., all branches)
- 2 One location, but not headquarters, handles all E-Verify submissions for all locations
- 3 All locations use E-Verify, but not all submissions are done from a single location
- 4 Individual locations may use or not use E-Verify at their own discretion
- 5 Certain locations use E-Verify because of federal, state, or local mandates but it is not used company-wide

6 Other (specify): _____

SECTION B: Implementing the E-Verify System

(ALL USERS VERIFYING OWN WORKERS ONLY)

B1. Have you personally completed the E-Verify online tutorial?

(Please choose only one response)

- 1 Yes
- 2 No
- 3 Don't know

(ALL USERS VERIFYING OWN WORKERS ONLY)

B2. Which staff members at your company who currently conduct verifications using E-Verify have completed the online tutorial on the E-Verify website?

(Please choose only one response)

- 1 I am the only user at this company..... **SKIP TO B4**
- 2 All of the other current users have completed the tutorial..... **ANSWER B3**
- 3 Some of the other current users have completed the tutorial..... **ANSWER B3**
- 4 None of the other current users have completed the tutorial..... **ANSWER B3**

(ALL USERS VERIFYING OWN WORKERS ONLY)

B3. Thinking about E-Verify system user IDs, at your company which of the following applies?

(Please choose only one response)

- 1 All users have their own unique user IDs
- 2 Some users share a user ID
- 3 Don't know

**NOTE TO PROGRAMMER:
IF NOT WEB SERVICES, GREY OUT #3 IN QUESTION B3**

(ALL USERS VERIFYING OWN WORKERS ONLY)

| | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <p>B4. For each of the statements below, select the answer that best represents your company's experience with the E-Verify enrollment process.</p> <p><i>Enrollment refers to the <u>initial</u> process of signing up a company for E-Verify including signing the MOU, determining which access method to use, and providing company information. Enrollment does not include taking the E-Verify tutorial or using E-Verify.</i></p> <p><i>(Please choose one response for each item)</i></p> | Strongly Agree | Agree | Disagree | Strongly Disagree | Don't Know |
| a. The online enrollment process was easy to complete | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. The online enrollment process was too time-consuming | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS ONLY)

| | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <p>B5. For each of the statements below, select the answer that best represents your company's experience with the E-Verify tutorial provided on the E-Verify website.</p> <p><i>(Please choose one response for each item)</i></p> | Strongly Agree | Agree | Disagree | Strongly Disagree | Don't Know |
| a. The content of the online tutorial on the E-Verify website was easy to understand | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. The tutorial adequately prepared us to use E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. The tutorial answered all of our questions about using E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. The tutorial took too long to complete | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. It was a burden to have to pass the Tutorial Knowledge Test (previously called the Mastery Test) before being allowed to use E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(BROWSER USERS VERIFYING OWN WORKERS)

| B6. For your company, how helpful are each of the following resources and features that are provided as part of the E-Verify system? <i>(Please choose one response for each item)</i> | Very Helpful | Helpful | Not Very Helpful | Not At All Helpful | Not Aware of Item | Never Used Item |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. The online E-Verify User Manual | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. The online tutorial | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Online webinars | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. E-Verify Quick Reference Guide | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. E-Verify Self-Assessment Guide | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Reports to monitor the status of employee cases | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Reports to monitor our company's use of the system and the use of individual users in our company | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Mouse-over features on data entry fields | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Any other features (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(WEB SERVICES USERS VERIFYING OWN WORKERS ONLY)

| B7. For your company, how helpful are each of the following resources and features that are provided as part of E-Verify? <i>(Please choose one response for each item)</i> | Very Helpful | Helpful | Not Very Helpful | Not At All Helpful | Not Aware of Item | Never Used Item |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. The online E-Verify User Manual M-775 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. The online E-Verify Web Services User Manual | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. E-Verify Quick Reference Guide for Web Services | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. E-Verify Self-Assessment Guide for Web Services | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. The Interface Control Agreement (ICA) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Any other feature (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL E-VERIFY WEBSITE USERS VERIFYING OWN WORKERS)

B8. Thinking about system navigation and data entry, how user-friendly is the E-Verify system?

(Please choose only one response)

- 1 Very user-friendly
- 2 Moderately user-friendly
- 3 Slightly user-friendly
- 4 Not at all user-friendly

SECTION C: Experiences with E-Verify

(ALL USERS VERIFYING OWN WORKERS)

C1. Which of the following is the MAIN reason your company agreed to participate in E-Verify?

(Please choose only one response)

- 1 State or local government required participation
- 2 Federal government required participation
- 3 To satisfy a client's request
- 4 Believed that using E-Verify would allow us to avoid a U.S. Immigration and Customs Enforcement (ICE) audit, raid, or fine
- 5 To improve ability to verify work authorization
- 6 Believed it would make us more competitive with others in our industry
- 7 Trusted recommendation from someone at another company or organization
- 8 Other (specify): _____
- 9 Don't know

(ALL USERS VERIFYING OWN WORKERS)

C2. Please answer the following questions about your company's current use of E-Verify.

(Please choose one response for each item)

| | Yes | No | Don't Know |
|---|--------------------------|--------------------------|--------------------------|
| a. Our company has federal contract(s) requiring participation in E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Our company does business in a state or locality that requires participation in E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-REQUIRED TO USE E-VERIFY)

C3. If your company were no longer required to use E-Verify, how likely is it that you would continue to use it?

(Please choose only one response)

- 1 Very likely.....ANSWER C4
- 2 Likely.....ANSWER C4
- 3 Maybe.....SKIP TO C7
- 4 Unlikely.....SKIP TO C5
- 5 Very unlikely.....SKIP TO C5

(USERS VERIFYING OWN WORKERS-REQUIRED TO USE E-VERIFY LIKELY TO CONTINUE)

| C4. Why would you be likely to continue using E-Verify? <i>(Please choose one response for each item)</i> | Yes | No | Don't Know |
|---|--------------------------|--------------------------|--------------------------|
| a. To possibly avoid a U.S. Immigration and Customs Enforcement (ICE) audit, raid, or fine | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. To improve our ability to verify work authorizations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. To remain more competitive with other companies in our industry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Our clients like that we use E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Other (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-REQUIRED TO USE E-VERIFY- UNLIKELY TO CONTINUE)

| C5. Why would you be unlikely to continue using E-Verify? <i>(Please choose one response for each item)</i> | Yes | No | Don't Know |
|---|--------------------------|--------------------------|--------------------------|
| a. Using E-Verify makes it difficult to attract qualified workers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. E-Verify is burdensome to use | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Using E-Verify makes us less competitive with other companies in our industry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. The financial costs of using E-Verify outweigh the benefits of using it | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. We seldom have any new hires | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Other (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS UNLIKELY TO CONTINUE USING E-VERIFY BECAUSE BURDENSOME)

C6. What makes E-Verify burdensome for your company?

(USERS VERIFYING OWN WORKERS)

| C7. Please indicate your own perceptions related to the impact that E-Verify has on your company. <i>(Please choose one response for each item)</i> | Strongly Agree | Agree | Disagree | Strongly Disagree | Not Applicable |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. The number of work-authorized persons who applied for jobs has decreased because E-Verify was used | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. The number of unauthorized workers who applied for jobs has decreased because E-Verify was used | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Qualified workers were difficult to recruit because E-Verify is used | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Using E-Verify has resulted in some existing employees choosing to leave (e.g., resignation or retirement) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Using E-Verify has resulted in the firing or termination of some existing employees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Using E-Verify has damaged the employee-management relationship | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Using E-Verify has created a competitive advantage for this company | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Using E-Verify has caused this company to be less competitive | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS)

| C8. Please consider each of the following statements related to E-Verify and select the response that best represents the experiences at your company. <i>(Please choose one response for each item)</i> | Strongly Agree | Agree | Disagree | Strongly Disagree |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. It is impossible to fulfill all the requirements in the E-Verify verification process | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Overall, E-Verify is an effective tool for employment verification | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. We believe E-Verify is highly accurate | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. We are sometimes unsure about how to enter certain types of names (e.g., single or long names and compound/hyphenated last names) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Frequent technical assistance is required from the Help Desk to use E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. At times it is impossible to submit the information required by the deadline | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. It is easy to make errors when entering employee information into the E-Verify system | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

NOTE TO PROGRAMMER: IF WEB SERVICES EMPLOYER, GREY OUT PART (g)**(USERS VERIFYING OWN WORKERS--USE E-VERIFY WEBSITE)**

| C9. Consider each of the following statements related to E-Verify and select the choice that best represents the experiences at your company. <i>(Please choose one response for each item)</i> | Strongly Agree | Agree | Disagree | Strongly Disagree |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Adequate training is usually provided when new program features are introduced | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. E-Verify is not always available because the federal system is 'down' | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. E-Verify is not always available because our Internet system is unreliable | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. System time-outs require us to re-enter information previously entered | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. The system closed a case that was started but not completed in E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS)

| C10. How easy is it for E-Verify users at your company to address the following situations related to passwords? <i>(If users did not experience the problem, select “Not applicable.” Choose one response for each item)</i> | Easy | Somewhat easy | Somewhat difficult | Difficult | Not applicable |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Reset the password using the self-service tools | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Reset the password by calling the E-Verify Help Desk | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(BROWSER ONLY USERS VERIFYING OWN WORKERS)

C11. To what extent was the overall cost of setting up E-Verify a problem for your company?

Examples of setup costs include costs for initial training of E-Verify staff, computer hardware and Internet access, filing cabinets and other office equipment, and any other related costs. We are interested in your general perceptions; no need to calculate costs.

(Please choose only one response)

- 1 A large extent
- 2 A moderate extent
- 3 A small extent
- 4 Not a problem
- 5 Don't know

(BROWSER ONLY USERS VERIFYING OWN WORKERS)

C12. To what extent is the overall cost of maintaining E-Verify a problem for your company?

Examples of maintenance costs include costs for training of replacement E-Verify staff, wages for E-Verify staff, computer maintenance and Internet access, and any other related costs. We are interested in your general perceptions; no need to calculate costs.

(Please choose only one response)

- 1 A large extent
- 2 A moderate extent
- 3 A small extent
- 4 Not a problem
- 5 Don't know

(WEB SERVICES USERS VERIFYING OWN WORKERS)

C13. To what extent was the overall cost of *setting up* E-Verify a problem for your company?

Examples of setup costs include costs for developing or purchasing Web services software, initial training of E-Verify staff, computer hardware and Internet access, filing cabinets and other office equipment, and any other related costs. We are interested in your general perceptions; no need to calculate costs.

(Please choose only one response)

- 1 A large extent
- 2 A moderate extent
- 3 A small extent
- 4 Not a problem
- 5 Don't know

(WEB SERVICES USERS VERIFYING OWN WORKERS)

C14. To what extent is the overall cost of *maintaining* E-Verify a problem for your company?

Examples of maintenance costs include costs for upgrading software to meet new E-Verify requirements, training of replacement E-Verify staff, wages for E-Verify staff, computer maintenance and Internet access, and any other related costs. We are interested in your general perceptions; no need to calculate costs.

(Please choose only one response)

- 1 A large extent
- 2 A moderate extent
- 3 A small extent
- 4 Not a problem
- 5 Don't know

(ALL USERS VERIFYING OWN WORKERS)

C15. Do you use any form of electronic I-9?

(Please choose only one response)

- 1 Yes
- 2 No
- 3 Don't know

(ALL USERS VERIFYING OWN WORKERS)

| C16. When processing the Form I-9, how often does your company take the following steps? <i>(Please choose one response for each item)</i> | Always | Often | Sometimes | Never |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Examine the documents the workers provide to determine if they appear to be genuine | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Examine the documents the workers provide to determine if they belong to the worker | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-EXAMINING DOCUMENTS TO DETERMINE IF GENUINE)

C17. When you examine workers' documents during the Form I-9 process to determine if they appear to be genuine, what do you check?

(USERS VERIFYING OWN WORKERS-EXAMINING DOCUMENTS TO DETERMINE IF GENUINE)

| C18. If you determine that the documents are NOT genuine, what do you do? <i>(Please choose one response for each item. If the situation has never arisen, select 'Not applicable'.)</i> | Always | Often | Sometimes | Never | Not applicable |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Accept the documents and enter the information into E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Ask for alternative documents before taking further action | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Do not hire the worker | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Fire the worker | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Other (Specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-EXAMINE (EXAMINE IF DOCUMENTS BELONG TO WORKER))

| C19. When you examine workers' documents during the Form I-9 process to determine if they belong to the worker, what do you do? <i>(Please choose one response for each item. If the situation has never arisen, select 'Not applicable.')</i> | Always | Often | Sometimes | Never | Not applicable |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Look to see if information (e.g., date of birth or name) on IDs match information on Form I-9 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Look to see if information (e.g., date of birth or name) on separate IDs match | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Look to see if date of birth on IDs is roughly consistent with person's appearance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Look to see whether the photo matches the person | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Other (Specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-EXAMINE IF DOCUMENTS BELONG TO WORKER)

| C20. If you determine that the documents do not appear to belong to the worker, what do you do? <i>(Please choose one response for each item. If the situation has never arisen, select 'Not applicable.')</i> | Always | Often | Sometimes | Never | Not applicable |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Accept the documents and enter the information into E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Ask for alternative documents before taking further action | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Do not hire the worker | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Fire the worker | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Other (Specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS)

C21. E-Verify sometimes returns a photo for Photo Matching, depending on the Form I-9 document provided by the employee.

Has your company ever used E-Verify Photo Matching?

(Please choose only one response)

- 1 Yes.....ANSWER C22
- 2 No.....SKIP TO SECTION D
- 3 Don't know.....SKIP TO SECTION D

(USERS VERIFYING OWN WORKERS-USE PHOTO MATCHING)

C22. When you receive a photo from the E-Verify Photo Matching response, do you compare the photo to:

- 1 The person only
- 2 The document the worker provided only
- 3 Both the person and the document the worker provided
- 3 Do not compare the photo to the worker or the document the worker provided
- 4 Other (Specify _____)

(USERS VERIFYING OWN WORKERS-USE PHOTO MATCHING) (SAME)

C23. Has Photo Matching influenced the types of documents your company asks for during the verification process?

(Please choose only one response)

- 1 Yes
- 2 No
- 3 Don't know

SECTION D: Verification Procedures

IF PLACEMENT OR RECRUITING FIRM [IF A13 is 'Yes']: "This section asks questions about your verification procedures for *your own workers, including internal staff and other workers on your payroll even if they are working off site or as temporary help for another company.*"

ALL OTHER TYPES: The following questions are about your verification procedures for *your workers*. Do NOT include information about workers at your company who are from temporary help agencies or contractors. **Do** include workers on your payroll who work off site.

(ALL USERS VERIFYING OWN WORKERS)

| D1. For which of the following does your company verify work authorization using E-Verify? <i>(Please choose one response for each item)</i> | Yes | No | Not Applicable |
|--|--------------------------|--------------------------|--------------------------|
| a. All new hires | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Employees who started working for this company because of merger or buy-out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Existing employees who worked at this company prior to when the company began using E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Existing employees with work authorizations that are about to expire | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Existing employees not believed to be work authorized | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Other types (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS)

D2. When is E-Verify typically used to verify work authorization?

(Please choose only one response)

- 1 Before a job offer is made
- 2 After a job offer but before the worker has accepted
- 3 After a job offer has been accepted but before the employee's first day of paid work
- 4 On the first day of paid work
- 5 On the second or third day of paid work
- 6 More than three days after starting paid work
- 7 Other times (specify): _____

(ALL USERS VERIFYING OWN WORKERS)

D3. How often would you say workers provide email addresses on their Form I-9?

(Please choose only one response)

- 1 Usually..... **ANSWER D4**
- 2 Sometimes..... **ANSWER D4**
- 3 Rarely..... **ANSWER D4**
- 4 Never..... **SKIP TO N14**

(USERS VERIFYING OWN WORKERS-EMAIL ADDRESSES PROVIDED)

D4. If workers provide their email addresses on the Form I-9, how often do you submit that information to the E-Verify system when creating a case for the worker?

(Please choose only one response)

- 1 Always..... **SKIP TO N14**
- 2 Often..... **ANSWER N13**
- 3 Sometimes..... **ANSWER N13**
- 4 Never..... **ANSWER N13**

(USERS VERIFYING OWN WORKERS-DO NOT ALWAYS SUBMIT EMAIL ADDRESSES)

| D5. Which of the following statements are reasons you don't always submit workers' email addresses to the E-Verify system? <i>(Please choose one response for each item)</i> | Yes | No |
|--|--------------------------|--------------------------|
| a. Submitting email addresses provided by workers is not a requirement | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Submitting email addresses provided by workers is not a priority for us | <input type="checkbox"/> | <input type="checkbox"/> |
| c. We need to protect the worker's privacy | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Workers ask us not to submit this information | <input type="checkbox"/> | <input type="checkbox"/> |
| e. It is difficult to read workers' handwriting | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Our staff is too busy to take this extra step of providing information | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Other reasons (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS)

D6. Has the E-Verify Monitoring and Compliance department ever contacted your company about its E-Verify procedures?

- 1 Yes..... **ANSWER D7**
- 2 No..... **SKIP TO D8**
- 3 Don't know..... **SKIP TO D8**

(USERS VERIFYING OWN WORKERS-CONTACTED BY MONITORING AND COMPLIANCE)

| D7. Did the E-Verify Monitoring and Compliance department contact your company for the following reasons? <i>(Please choose one response for each item)</i> | Yes | No | Don't know |
|---|--------------------------|--------------------------|--------------------------|
| a. Immediately terminating employment when the worker received a Tentative Nonconfirmation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Creating duplicate cases for the same employee | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Closing cases (e.g., using incorrect case closure statements or failing to close cases) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Failing to create a case by the third business day after the employee started working for pay | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Failing to print a Further Action Notice | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Requesting specific documents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| g. Other (Specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|--------------------------|

(USERS VERIFYING OWN WORKERS-CONTACTED BY MONITORING AND COMPLIANCE

D8. Did your company change its procedures after being contacted by the E-Verify Monitoring and Compliance department?

(Please choose only one response)

- 1 Yes..... **ANSWER D9**
- 2 No..... **SKIP TO D10**
- 3 Don't know..... **SKIP TO D10**

D9. What changes did your company make to its procedures after being contacted by the E-Verify Monitoring and Compliance department?

(ALL USERS VERIFYING OWN WORKERS)

D10. As far as you know, did your company receive any Tentative Nonconfirmation findings because of a data entry mistake when entering the I-9 information into E-Verify?

(Please choose only one response)

- 1 Yes..... **ANSWER D11**
- 2 No..... **SKIP TO D12**
- 3 Don't know..... **SKIP TO D12**

(USERS VERIFYING OWN WORKERS-HAD DATA ENTRY TNC)

D11. When a data entry error is found, how do you typically correct it?

(Please choose only one response)

- 1 We close the original case as an invalid query and enter the corrected information as a new case
- 2 We enter the corrected information as a new case but do not close the original case as an invalid query
- 3 We submit the case as a revision of the original case when prompted by the system

4 Other (specify): _____

(ALL USERS VERIFYING OWN WORKERS)

D12. Did your company have any Tentative Nonconfirmation findings that were NOT the result of data entry errors?

(Please choose only one response)

- 1 Yes..... **ANSWER D13**
- 2 No..... **SKIP TO D25**
- 3 Don't know..... **SKIP TO D25**

(USERS VERIFYING OWN WORKERS-HAD TNCS)

D13. When workers receive Tentative Nonconfirmations, how often does your company inform the worker about it?

(Please choose only one response)

- 1 Always **ANSWER D14**
- 2 Often **ANSWER D14**
- 3 Sometimes **ANSWER D14**
- 4 Never **SKIP TO D18**

(USERS VERIFYING OWN WORKERS-INFORM WORKERS ABOUT TNCS)

| D14. How often does your company inform workers about their Tentative Nonconfirmations in the following ways? <i>(Please choose one response for each item)</i> | Always | Often | Sometimes | Never |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| a. In-person | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Telephone call or Skype | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Email | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Regular mail, FedEx, certified mail | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Other (Specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-HAD TNCS)

D15. How soon after a Tentative Nonconfirmation is received does your company typically notify the employee?

(Please choose only one response)

- 1 A day or less
- 2 Within three days
- 3 Within a week
- 4 More than a week

- 5 We do not usually notify the employee

(USERS VERIFYING OWN WORKERS-HAD TNCS)

D16. How often has your company used the Further Action Notice to process Tentative Nonconfirmations?

(Please choose only one response)

- 1 Always
 2 Often
 3 Sometimes
 4 Never

(USERS VERIFYING OWN WORKERS-HAD TNCS)

D17. How often does your company do the following when using the Further Action Notice and Referral Date Confirmation

(Please choose one response for each item)

| | Never | Sometimes | Often | Always | Not Applicable |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. We discuss the Further Action Notice privately with workers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. If needed, we provide workers with a translated version of the Further Action Notice | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. We create a new case without closing the old one if the information on the Further Action Notice is not correct | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. After workers sign the Further Action Notice, we sign it | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. When workers decide to contest the Tentative Nonconfirmation and sign the Further Action Notice, we keep a copy in their file | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. We provide the worker with the Referral Date Confirmation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. We inform the worker that he/she has 8 federal work days to contact the Social Security Administration or Department of Homeland Security | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-HAD TNCS)

| <p>D18. How often does each of the following situations apply to your company's use of E-Verify for persons receiving Tentative Nonconfirmations? <i>(Please choose one response for each item)</i></p> | Never | Sometimes | Often | Always | Not Applicable | Don't know |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Employees quit before we have a chance to tell them about the finding | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Employees do not return to work when a Tentative Nonconfirmation is received | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. We don't tell employees about Tentative Nonconfirmations but let them continue to work for us | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. We decide not to hire employees receiving Tentative Nonconfirmations without telling them about the finding | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. We decide to fire employees receiving Tentative Nonconfirmations without telling them about the finding | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Employees decide to quit rather than contest the Tentative Nonconfirmation finding | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Employees tell us that they plan to contest | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Employees are unable to contest a Tentative Nonconfirmation because of barriers such as language or bureaucracy/'red tape' | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-HAD TNCS)

| D19. Please consider each of the following statements related to Tentative Nonconfirmations received during employment verification using the E-Verify system. Select the answer that best represents the experiences of your company. <i>(Please choose one response for each item)</i> | Strongly Agree | Agree | Disagree | Strongly Disagree |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Contesting Tentative Nonconfirmations is not encouraged because the process requires too much time | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Providing assistance to employees who contest Tentative Nonconfirmations is an excessive burden on staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Contesting Tentative Nonconfirmations is not encouraged because work authorization rarely results | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Establishing work authorization has become a burden because there are so many Tentative Nonconfirmations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Work assignments must be restricted until work authorization is confirmed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Pay is reduced until work authorization is confirmed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Training is delayed until after work authorization is confirmed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(USERS VERIFYING OWN WORKERS-HAD TNCS)

D20. Has your company ever had a worker receive a Final Nonconfirmation (or unauthorized to work) finding?

(Please choose only one response)

- 1 Yes..... **ANSWER D21**
- 2 No..... **SKIP TO D25**
- 3 Don't know..... **SKIP TO D25**

(USERS VERIFYING OWN WORKERS-HAD FNC)

D21. When workers receive a Final Nonconfirmation, how often does your company terminate the worker's employment?

(Please choose only one response)

- 1 Always
- 1 Often
- 2 Sometimes
- 3 Never

(USERS VERIFYING OWN WORKERS-HAD FNC-DON'T ALWAYS TERMINATE EMPLOYMENT)

D22. Please explain why your company does not always terminate employees who receive Final Nonconfirmations.

(USERS VERIFYING OWN WORKERS-HAD FNC)

| D23. Which of the following affect how long a worker at your company could remain on the job after receiving a Final Nonconfirmation? <i>(Please choose one response for each item)</i> | Yes, Always | Yes, Sometimes | No | Not Applicable |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| a. The worker's employment is terminated immediately | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. The worker's departure is linked to the company's pay period (e.g., the end of the month) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. We time the departure to fall within a certain amount of time after receiving the Final Nonconfirmation (e.g., within 3 or 5 days) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Other (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS)

D24. How often do workers appeal a Final Nonconfirmation?
(Please choose only one response)

- 1 Always
- 2 Often
- 3 Sometimes
- 4 Never

(ALL USERS VERIFYING OWN WORKERS)

D25. How often does your company close E-Verify cases within 90 days of initial case submission?

(Please choose only one response)

- 1 Always.....**SKIP TO D27**
- 2 Often.....**ANSWER D26**
- 3 Sometimes.....**ANSWER D26**
- 4 Never.....**ANSWER D26**

(USERS VERIFYING OWN WORKERS-NOT ALWAYS CLOSE CASES)

| D26. Which of the following statements describe why your company does not always close cases within 90 days <i>(Please choose one response for each item)</i> | Yes | No |
|---|--------------------------|--------------------------|
| a. Closing cases is burdensome or time consuming | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Worker does not let us know if Form I-9 information is correct when E-Verify asks us to confirm or change the information initially submitted to the system | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Worker does not state whether he/she wishes to contest the Tentative Nonconfirmation | <input type="checkbox"/> | <input type="checkbox"/> |
| d. A Tentative Nonconfirmation case has not been resolved by Department of Homeland Security or Social Security Administration | <input type="checkbox"/> | <input type="checkbox"/> |
| e. The worker has quit before receiving a final finding from E-Verify | <input type="checkbox"/> | <input type="checkbox"/> |
| f. The worker was fired for a reason unrelated to E-Verify before receiving a final finding from E-Verify | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Other (Specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS)

| <p>D27. The following statements describe possible changes that could be made to E-Verify procedures. Please select the answer that best describes your views for each of these possible changes.</p> <p><i>(Please choose one response for each item)</i></p> | Strongly Support | Support | Oppose | Strongly Oppose | No Opinion |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Requiring all companies in the United States to use E-Verify | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Eliminating the paper Form I-9 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Including the ability to take and verify fingerprints | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Increasing the types of documents that can be used with Photo Matching | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Adding a formal appeal process that employers or their employees could use if they disagree with the final case finding | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Allowing employers that are not federal contractors to verify existing employees hired prior to signing an MOU | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Allowing all companies to verify job applicants | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Having workers receive a text message from USCIS informing them of their TNC in addition to receiving the Further Action Notice from employers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Including information in USCIS email notifications for workers to contact SSA or DHS directly to resolve their TNCs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Adding employer's name to the E-Verify email notification letter to workers with Tentative Nonconfirmations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Sending separate email notification letters to workers who receive Tentative Nonconfirmations from SSA and DHS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Including contact information for workers to receive assistance to appeal Final Nonconfirmations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Any other changes you might want to suggest (specify): _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(ALL USERS VERIFYING OWN WORKERS)

D28. Please use the space provided below to provide comments or suggestions for improving E-Verify.

**Thank you for taking the time to answer this survey.
Your effort and the information you have provided are greatly appreciated.**