**Request for Remote Agent Access - Form I-9 Completer**

This request form grants access to complete the Form I-9 Sections 2 or 3 as applicable and allows access to personal information, such as employee SSNs, DOB, and employee address for a limited period of time. By completing this form, the department and remote agent take responsibility for the usage and security of all sensitive information accessed by the remote agent listed.

Agent First Name Agent Last Name City

State

E-mail Address Phone Number

Will this individual serve as a remote agent for CSU in the future?

Yes

Employee (New Hire) Information Department

First Name Last Name Start Date

Form Completed By

Department Head Signature

Remote Agent Signature

The form may be sent to the Office of Financial Aid for student hires and HR Records for all other hires. Scanned forms are accepted.