

Robert S. Welch Center for Graduate and Professional Studies

1021 Dulaney Valley Road Baltimore, Maryland 21204

P: 410-337-6200 1-800-697-4646 F: 410-337-6085 www.goucher.edu

AGENT AUTHORIZATION AGREEMENT

GOUCHER COLLEGE hereby appoints (printed name of notary or Goucher employee
representative) to serve as an Agent of Goucher for the sole purpose of witnessing the original identification documents of (name of
Goucher for the sole purpose of witnessing the original identification documents of (name of future employee of Goucher College)
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The Agent's duties shall be to perform both duties below:
□ Examine the original documentation required in Section 2 of the Employment Eligibility Verification I-9 Form for the above stated employee;
□ Complete Section 2 of the I-9 form on Goucher's behalf for the benefit of the above named employee and sign and date the Section 2 certification.
A copy of this agreement signed by both parties shall be returned and kept with the I-9 form on file with the Employer.
Authorized by: Ava L. Norris
Position/Title: Associate Director of Administration for Graduate Programs in Education
Signature:
I hereby accept my appointment as Agent, as described above.
Signature Date
Title of Agent
Place of Business of Agent