



**ILLINOIS DEPARTMENT  
OF LABOR**  
160 North LaSalle  
Suite C-1300  
Chicago, IL 60601 – 3150

Phone: (312) 793-1805  
Fax: (312) 793-5257

For Office Use Only
Date Received:
File #:
Reviewed by:

**E-Verify  
Employer Attestation Form**

Under penalty of perjury, I attest that:

1. \_\_\_\_\_ has received the E-Verify training materials from  
(insert Company or Business Name)  
the Department of Homeland Security (DHS) and all Employer personnel administering the E-Verify System have completed the Computer Based Tutorial (CBT);
  
2. Employer has posted in a prominent place that is clearly visible to prospective employees:
  - i) the notice from DHS indicating that Employer is enrolled in E-Verify; and
  - ii) the anti-discrimination notice issued by the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, U.S. Department of Justice.

\_\_\_\_\_  
Signature of Employer or Authorized Representative Date

Print Name of Signatory: \_\_\_\_\_

Print Title of Signatory: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Pursuant to Section 12(b) of the Right to Privacy in the Workplace Act, 820 ILCS 55,  
as amended, **effective January 1, 2008**