Date			
This is evidence of on-c	campus employment for		
(Name of F-1/J-1* stu		lent)	
Nature of student's job	responsibilities:		
J	(cashier, receptionist, office assis	tant, etc.)	
Start Date:	Number of Hours/Week:	Number of Hours/Week:	
Employer Contact Inf	ormation:		
	386005986		
	(Employer Identification Number)		
	(Employer Telephone Number)		
	ning this employment verification document, I understand		
2.) This stude	(Name and Title of Student's Immediate Supervisor)		
	(Immediate Supervisor Signature, no stamps)		
	ents must have on-campus work authorization in their SEV		
(Please do not write l	pelow this line. This section is for Office of International Se	tudents' use only.)	
Designated School Off	icial— Office of International Students Representative	☐ Add work authorization	
Typed or printed nam	e	in SEVIS- for J students only	
	Phone Number	Date:	