

**Social Security Employer Authorization Letter**

To whom it may concern:

This is evidence of on-campus employment for: \_\_\_\_\_  
**(Name-F-1 Student)**

**Nature of student's job** (e.g., wait staff, library aide, research assistant, etc.):  
\_\_\_\_\_

Start Date: \_\_\_\_\_ Number of Hours/Week: \_\_\_\_\_

Employer contact information: \_\_\_\_\_  
**(Employer Identification Number (EIN))**

\_\_\_\_\_  
**(Employer Telephone Number)**

\_\_\_\_\_  
**(Student's Immediate Supervisor)**

Employer Signature (Original): \_\_\_\_\_

Signatory's Title : \_\_\_\_\_

Date : \_\_\_\_\_