

EMPLOYMENT VERIFICATION FORM

Supporting F-1 Student Social Security Number Application

TO: Social Security Administration 807 Crosby St Chester, PA 19013

VERIFICATION FROM ON-CAMPUS EMPLOYER:

This is evidence of on campus employment for _	Legal First Name and Last Name, as Shown on Passport and I-94
Nature of employment:	, , ,
Job Start Date:	Number of Hours/Week:
Employer's Ident	ification Number (EIN): 23-1352683
On-Campus Employer (Name of Office)	Employer's Phone Number
Name of Student's Immediate Supervisor	Supervisor's Signature
Supervisor's Title	Date
VERIFICATION FROM THE Internationa	l Student Center
	as a full-time student at Swarthmore College and has been
offered on-campus employment in the(On G	office/department as a Campus Employer)
	s described above. Thank you for considering the student's application
(Nature of Employment)	
Signature of Designated School Official	Name of Designated School Official
Phone Number	Date