

**ON-CAMPUS EMPLOYMENT VERIFICATION LETTER
FOR SOCIAL SECURITY CARD APPLICATION PURPOSES
UCSD International Center**

(NOTE: Please issue letter on original UCSD department letterhead.)

SAMPLE LETTER

(Date)

To Whom It May Concern:

This is to verify that _____ is/will be employed at
(Student Name)

the University of California, San Diego as a/an _____
(Title/Position or Nature of Employment)

in the Department of _____ for _____ per week.
(Department Name) (Number of Hours)

Employment began/Employment is expected to begin on _____.
(Month/Day/Year)

Employer Contact Information:

(Employer Identification Number (EIN))
_____(95-6006144)_____

(Employer Telephone Number)

(Student's Immediate Supervisor)

Sincerely,

Employer Signature (Original)
Signatory's Name and Title

(IC200801)