Center for International Education
3800 Victory Parkway
Cincinnati, OH 45207-2171 U.S.A
Phone: +1 (513) 745-2864
Fax: +1 (513) 745-2876
www.xavier.edu/international

SOCIAL SECURITY NUMBER (SSN) SUPPORT LETTER

Student Name *(must match your passport):* _____

                                            Last Name(s)   *First Name(s)*

Date of Birth: _____ (MM/DD/YYYY)   Email: _____

Address: _____

_____

Year/Academic Level: _____   Major(s): _____

Employment Start Date: _____   Number of Work Hours/Week _____

During the academic school year, immigration regulations permit F-1 & J-1 students to work a maximum of 20 hours/week. If you are getting paid by Xavier, you must also meet with the Career Development Office, in the CLC. Visit www.xavier.edu/career or call (513) 745-3141.

Student's Signature_____ Date:_____

I certify that this student is enrolled full time at Xavier University and has a position of employment. Please assist this student in issuing him/her a Social Security Number (SSN).

_____
Signature of Designated School Official (DSO)/Alternate Responsible Officer (ARO)

_____
Printed Name of DSO/ARO & Title   Date

_____
Email   Phone

Employment Verification

An F-1 or J-1 student may work while the SSN application is being processed. Employers may wish to reference SSA's fact sheet available here http://www.socialsecurity.gov/employer/hiring.htm.

Name of Employer: _____

Address of Work Location: _____

_____

Name of Supervisor: _____

Supervisor's Email: _____

Supervisor's Phone: _____

Job Title/Positon: _____

Description of Duties & Responsibilities: _____

_____

_____

_____

_____

Supervisor/Employer Signature   Date