EMPLOYMENT VERIFICATION LETTER

Student's Name: _	(Family Name)	(First)	(Middle Initial)
TO BE COMPLETED	BY EMPLOYER OF	R HIRING DEPA	RTMENT:
Employment Departm	nent_ Clemson Unive	rsity	
Employment Position	TitleStart	DateV	Vork hours per week
Employment Job Nati Academic/Athletic Sc	•	ssistant, Library <i>F</i>	Aid, Wait Staff, Cashier,
Employer Address: C	lemson University C	ity	State _SC Zip 296
Employer Phone Nun	nber(864)		
Employer Identification	n Number_57-60002	254	
Name of Student's Im	mediate Supervisor	(Print)	
Employer Name (Prin	t)	Employer	Title
Employer Signature_			Date / /
"My signature above ce University and that the (Employment Position,	ertifies that the above na student is performing w Employment Start Date the employer or the au	amed person is a vork in accordance e, Employment Jol thorized member o	J-1 visa student at Clemson with the specifications Nature, etc.) listed above. I of the department responsible
TO BE COMPLETED	BY THE RO / ARO:		
	nature below certifies t	hat the student wi	ent at Clemson University and II be performing responsibilities
Name of RO/ ARO/ Des	signated School Officia	I (Print)	
Signature of RO/ ARO/	Designated School Off	ficial	
RO/ ARO/ DSO Phone	Number (864) 656-361	4	Date / /