



## EMPLOYMENT VERIFICATION LETTER FOR STUDENTS ON F-1 VISAS

### Section I: Student Information

Last Name:

First and Middle Name:

### Section II: Completed by Employer/Hiring Department

Employment Department:

Employment Position Title:

Employment Start Date:

Hours/week:

Nature of Employment (Examples: research assistant, library aid, wait staff, cashier, academic/athletic scholarship):

#### Employing Department Information

Employer ID Number: **57-6000254**

Street:

City:

State:

Zip:

Phone:

Student's Immediate Supervisor:

Last Name:

First and Middle Name:

Employer Name (First and Last):

Employer Title:

Employer Signature: \_\_\_\_\_ Date:

"My signature above certifies that the above named person is a student on an F-1 visa attending Clemson University and that the student has received an offer of employment in accordance with the specifications (employment position, start date, etc.) listed above. I further certify that I am the employer or the authorized member of the hiring department responsible for confirming the student's current employment at Clemson University."

### Section III: Completed by International Services (Office of Global Engagement)

**New students:** Once your department completes section II of this form, upload this employment verification letter to your student portal. Directions: On the left-hand side of your student portal, click the tab entitled University Employment and select Employment Eligibility Verification Letter Upload Form.

**Continuing students:** Once your department completes section II of this form, bring your employment verification letter to the International Services office. Phone (864) 656-3614 for campus directions to office.

"My signature below certifies that the person named above is an enrolled F-1 visa student at Clemson University and is active in SEVIS. My signature certifies that the student has been offered employment with the department listed above and will be performing responsibilities directly related to the purpose of the student's program."

Name of Designated School Official (DSO)/RO/ARO:

Last Name: \_\_\_\_\_ First and Middle Name: \_\_\_\_\_

Signature of DSO/RO/ARO: \_\_\_\_\_

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

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