



**SOCIAL SECURITY VERIFICATION FORM FOR
F-1 AND J-1 ON-CAMPUS EMPLOYMENT**

Student Name as it appears in the passport and I-20 or DS-2019:

Last Name

First Name

Middle

Date of Birth: _____ SEVIS ID #: N00 _____
Month/Day/Year

YU Student ID#: _____ Immigration Status (circle one): F-1 J-1

TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR AT PLACE OF EMPLOYMENT

Employing Department or Office: _____

EIN: 13-1624225 Telephone Number: _____

Beginning Date: ____/____/____ Hours per Week: _____

Job Description: _____

Direct Supervisor's Name: _____
Print Signature

Title _____ Date _____

*****NOTE** that SSA will not accept this form if anything is crossed out

TO BE COMPLETED BY AN INTERNATIONAL STUDENT ADVISOR AT THE OISS

Per 8CFR 214.2(f) (9) (i), this student is permitted on-campus employment up to 20 hours per week while classes are in session. Full-time employment is permitted during vacation periods, provided the student intends to register for the subsequent term.*

***Yeshiva University policy permits a maximum of 15 hours per week while classes are in session.**

According to SSA POMS **RM 10211.270** a student eligible for a SSN for on-campus employment may apply up to 30 days in advance of the start date of the I-20 or the employment.

I have verified that this student is registered in SEVIS, attending school, and is eligible for the on-campus employment described above.

Name _____
Print Signature

Title _____ Date _____