

## **Verification of F-1/J-1 Student On-Campus Employment**

ATE:	nis form must be filled out by e	STUDENT TECH II	•	to link.mnsu.edu/intlemployment.
О:	Whom It May Concern/Social Security Administration			
ROM:	Minnesota State University, Mankato			
<u>SECTIO</u>	N 1: Employing Department	Must Complete		
This is ev	vidence of on-campus employm			Middle, LAST (in CAPS)
			•	
Employi	ng Department			
Nature o	of Student's Job: 🗆 Campus Ass	sistant 🗆 Para-professional [	☐ Student Lead	Other (list):
Start Da	te/	Number of Hours/Week	:	<u> </u>
•		U's EIN is: 41-168 7554)		
. ,	E	mployer Identification Number – E	IN	
Name of Student's Immediate Supervisor			 Title	
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Supervis	sor's Name – Original Signatur	e	Date	
Printed or Typed Name of Employer/Department			Supervisor's Phone Number	
SECTIO	N 2: Verification of Employm	ent Offer – To be complete	ed by Kearney	Center Staff Only!
Kearney Center Representative – Original Signature			Current Status of Student	
Printed or Typed Name of Kearney Center Representative			Date	
				Work Permit Dates Approved:
	rms are signed and completed	☐ Active in SEVIS		Start Date//
	Verified (passport, I-20, etc.) ed Full-Time	<ul><li>□ No holds</li><li>□ Add temporary MSU #</li></ul>		End Date/
	eu i oli-tillie	Staff Initials:		
		Oran minato		