



### Certification of F-1 Student On-Campus Employment for Social Security Number Application

**Instructions:** Please type requested information directly into the form. The hiring department must complete Section A including an *original signature*. The student must then take this form, along with their passport, I-20, I-94, and a copy of the job/appointment letter to the Office of International Education for endorsement in Section B. Once endorsed, the student must still apply for the SSN through the SSA Office. Please note - International students in F-1 or J-1 status may work no more than 20 hours per week while classes are in session during the fall and spring semesters but are permitted to work 40 hours during annual school breaks (i.e., summer, winter and spring breaks).

#### A. SUNY ESF Hiring Department Information

<i>First name of the student (as it appears on I-20)</i>	<i>Last name of the student (as it appears on DS-2019)</i>	Student's SUNY ESF ID #:
<i>Name of the on-campus employer/department:</i>		Employer Identification Number (EIN): <b>15-0532081</b>
<i>Employer / Department address (include city, state, and zip code);</i>		
<i>Position title and nature of student's employment:</i>		
<i>Employment start date (mm/dd/yyyy):</i>	<i>Number of hours per week:</i>	
<i>Name of student's immediate supervisor:</i>	<i>Title of student's immediate supervisor:</i>	
<i>Supervisor's telephone number:</i>		
_____ <i>Signature of Student's Immediate Supervisor</i>		_____ <i>Date Signed</i>

#### B. Certification of PDSO/DSO at the Office of International Education

This section will be endorsed only after section A is completed and signed.

***This is to certify that the student named above is an F-1 student from SUNY ESF in active SEVIS status. The student is working or has been offered on-campus employment as described above. The student may apply for a Social Security Number on or after***

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Primary/Designated School Official:

\_\_\_\_\_  
*Printed Name & Signature of Primary/Designated School Official*

\_\_\_\_\_  
*Date Signed*