

## Certification of J-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 <u>original signature</u>. The student must then take this form, along with their passport, DS-2019, 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-1or 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). Employment must also be authorized in SEVIS (annually).

A. SUNY ESF Hiring Department Information				
<i>First name</i> of the student (as it appears on I-20)	<i>Last name</i> of the student (as it appears on DS-2019)		rs on DS-2019)	Student's SUNY ESF ID #:
Name of the on-campus employer/department:			Employer Identification Number (EIN):	
	15-0532081			
Employer / Department address (include city, state, and zip co	ode);			
Position title and nature of student's employment:				
Employment start date (mm/dd/yyyy):		Number of hours per week:		
Name of student's immediate supervisor:		Title of student's immediate supervisor		
Supervisor's telephone number:				
Signature of Student's Immediate Supervisor				
Signature of Student's infinediate Supervisor Date Signed				
B. Certification of Alternate/Responsible Officer 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 a J-1 student attending SUNY ESF. The student is working or has been offered				
on-campus employment as described above. The s	tudent may app	bly for a Social Se	curity Number on	or after
Alternate/Responsible Officer:				
Printed Name & Signature of Alternate/Responsible Officer Date Signed				ate Signed

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