



Evidence of On-Campus Employment

To Social Security Administration:

This is evidence of current or offered on-campus employment for:

Last Name First Name SEVIS ID: N
(I-20 or DS-2019 ID Number)

Name of on-campus employer (Department): _____

Nature of employment/position: _____

Employer Identification Number (EIN): 04-2103634

Employer telephone number: _____ Number of Hours: _____
(per week)

Student's immediate supervisor (please print): _____

Employer's signature (original): _____

Employer's title: _____ Date: _____

The international student mentioned above is registered as a full-time student. This student is authorized to engage in Tufts on-campus employment for a period not exceed 20 hours per week when school is in session and up to 40 hours per week during school vacations. Please feel free to contact the Principal Designated School Official that listed below for any questions.

Sincerely,

[] **Reiko Ohmura** (Principal Designated School Official and Responsible Officer) Tufts International Center – Fletcher Office
(P) 617-627-2815 (E) reiko.ohmura@tufts.edu

[] **Mary Dulat** (Designated School Official and Alternate Responsible Officer)

[] **Halley Goldman** (Designated School Official and Alternate Responsible Officer)

[] **Joseph Renzi** (Designated School Official and Alternate Responsible Officer)

Date