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

Instructions:
1. Ask your hiring department manager to complete Part 1 of this form. **THIS FORM IS ONLY VALID IF PRINTED ON LETTERHEAD OF HIRING DEPARTMENT**.
2. Present the signed form to the OISS in-person during walk-in hours or by email at bcis@bc.edu. You will be notified when the signed form is ready to pick up.
3. Take this form to the Social Security office along with the other documents listed on the On-Campus Work Procedure handout.

Part 1: To be completed by the on-campus employer. Employers must complete ALL fields.

Student Last/Family Name: _____ Student First/Given Name: _____

Student Eagle ID: _____ Name of Office/Department: _____

Nature of student's job (e.g. wait staff, tutor, research/teaching assistant, etc.)

_____

Employment Start Date: _____ Employer Identification Number (EIN): 042103545

Number of hours per week: _____ Employer Telephone Number: _____

Name and Title of Student's Immediate Supervisor: _____

Supervisor Signature: _____ Date: _____

Part 2: To be completed by the Office of International Students and Scholars (OISS).

This is to certify that the above-named student is enrolled in a full-time program at Boston College and has secured on-campus employment. The nature of the employment is (check one):

PART TIME for a maximum of _____ hours per week   FULL-TIME (summer only)

for the:

ACADEMIC YEAR of _____.   SUMMER of _____.

WINTER BREAK OF _____.   SEMESTER only.

Name of DSO: _____ Date: _____

Signature of DSO: _____

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