



Office of Admissions and Records
International Student Services

INTERNATIONAL STUDENT EMPLOYMENT CLEARANCE FORM

To be completed by student:

Student Name _____

 Last (Family) First

ID# (SA) _____ (HR) _____ Social Security Number* _____

US Address _____

 # Street City State Zip code

Phone number _____ Email _____

Date of initial entry in the US (MM/YYYY) _____ Expected completion date _____

Name of on-campus employer (department): _____

I understand that my on-campus employment can be terminated if I violate the conditions of my immigration status or if I do not extend my status before the expiration date.

Student Signature

Country of Citizenship

Date

*Note: Disclosure of your Social Security Number is voluntary. If you consent to disclose your Social Security Number by including it on this form, it will be used for tracking purposes and to match your request with your educational records.

For OUHSC ISS office use only:

IMMIGRATION STATUS CLEARANCE

This clearance supersedes prior clearances.

• **Non-immigrant visa status:** F-1 J-1 J-2 other _____

• **Hours enrolled:** _____ **Undergraduate / Graduate**

○ Graduate Assistantship: Yes No

• **Enrollment Status:** Full Time / Part Time

• **Employment Limitations:**

___ Can be employed up to 20 hours per week **Effective from** _____ **to** _____
(up to 40 hours per week during spring, summer and winter break)

___ Can be employed full-time **Effective from** _____ **to** _____

___ Student employment must end _____ due to graduation

___ Student employment must end _____ due to transfer to another school

___ Employment must be terminated due to immigration status violation.

Designated School Official

Date

Updated 7/2008