



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