

SAMPLE LETTER FROM THE ON-CAMPUS EMPLOYER

(The letter should be typed on official department letterhead and contain the employer's original signature)

Social Security Administration

To Whom It May Concern:

This is to verify that \_\_\_\_\_  
Student's Name

has been offered on-campus employment (or is already working as a student assistant or a graduate assistant).

Nature of Student's Job: \_\_\_\_\_

Department of Employment: \_\_\_\_\_

Start Date: \_\_\_\_\_ Number of Hours/Week: \_\_\_\_\_

Employer's Contact Information: ID 34-6002924  
Employer Identification Number (EIN)

\_\_\_\_\_  
Employer's Telephone Number

\_\_\_\_\_  
Student's Immediate Supervisor

Employer Signature (Original): \_\_\_\_\_

Signatory's Title: \_\_\_\_\_

Date: \_\_\_\_\_