



EMPLOYMENT VERIFICATION LETTER FOR STUDENTS ON F-1 & J-1 VISAS

Section I: Student Information

Last Name: _____ First and Middle Name: _____

Section II: Completed by Employer/Hiring Department

Employment Department: _____

Employment Position Title: _____

Employment Start Date: _____ Hours/week: _____

Nature of Employment (Examples: research assistant, library aid, wait staff, cashier, academic/athletic scholarship): _____

Employing Department Information

Employer ID Number: 57-6000254

Street: _____ City: _____

State: _____ Zip: _____ Phone: _____

Student's Immediate Supervisor Information

Last Name: _____ First and Middle Name: _____

Supervisor Title: _____

"By issuing this letter, I confirm that the above-named person is a student on an F-1 visa attending Clemson University and that the student has received an offer of employment in accordance with the specifications (employment position, start date, etc.) listed above. I further certify that I am the employer or the authorized member of the hiring department responsible for confirming the student's current employment at Clemson University."

Section III: Completed by International Services (Office of Global Engagement)

New students: Once your department completes section II of this form, upload this employment verification letter under the final section of your SEVIS Check-In e-form in the iStart Portal. You can only apply for a Social Security Number (SSN) once you receive this completed letter and your SEVIS record is activated.

Continuing students: Once your department completes section II of this form, upload to the iStart Portal. On the left-hand side of your student portal, click the University Employment tab and select Employment Verification Letter Upload.

"My signature below certifies that the above-named person is an enrolled F-1 or J-1 student at Clemson University and is active in SEVIS. My signature certifies that the student has been offered employment with the department listed above and will be performing responsibilities directly related to the purpose of the student's program."

School Official (PDSO, DSO, RO, or ARO) Information

Last Name: _____ First and Middle Name: _____

Signature of PDSO/DSO/RO/ARO: _____ Date: _____