ON-CAMPUS EMPLOYMENT
DATA IN-TAKE FORM FOR F-1 STUDENTS

DHS (Department of Homeland Security) requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20, Certificate of Eligibility for Nonimmigrant Student Status, authorizes the named school to release such information from your records. For reference, see page 3 of 3, Authorization to Release Information by School of your I-20 Form.

Submit a separate form for each job on campus. Please complete, sign (use a blue-ink pen) and deliver to International Student Support Office, Stokes Hall, Room 111-B, or send via campus mail.

First Name                                       Middle Name                                                 Last Name (Surname)
_____________________________________________________________________________________
SEVIS #: _______________________________   Class Yr.: ______________________
Name of Employer: __________________________
Name of Supervisor: _________________________
Department: _______________________________   Dept. Telephone #: ___________________
Location on Campus where you will be physically working (Building and Rm. #): ___________________
EMPLOYMENT START DATE (Month, Day and Yr.): ______________________________
EMPLOYMENT END DATE (Month, Day and Yr.): ________________________________
Describe your job responsibility below (this includes getting a stipend if you are engaged in research being conducted on campus):
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
Print your legal name: __________________________
Signature (use a blue-ink pen): ___________________ Date: _____________