SAMPLE

On-Campus Employer letter (verifying employment)
Must be typed or written on official school letterhead and containing the employer's original signature.

To Whom It May Concern Social Security Administration		
Date		
F-I student attending Harvard Unive	rment to ersity, as a to exceed 20 hours per week. Start Date:	(e.g. waii
Employer's Identification Number (EIN)	
Employer's Signature		
Employer's Name, typed or printed		
Employer's Telephone Number		