

International Student Advisor, Designated School Official

1900 Commerce Street Box 358401 Tacoma, WA 98402 Phone: 253.692.4762 uwtiss@uw.edu tacoma.uw.edu/iss

To be completed by	Student		
Student Name:	(Last)	_	(First)
UW Student Number:	Cou	ntry of Citizenship: _	
SEVIS#: N	Ema	il:	@uw.edu
I confirm that I have:	□ Updated my local address□ Registered full-time	ess in MyUW	
Soci	al Security Ve	rification F	orm
To be completed by	v Hiring Official		
On-Campus Employer: _			
Employer Identification Number (EIN): OR 91-6001537 (for University of Washington			
Job Location/Address:			
Supervisor's Name:		Phone:	
Beginning Date:	Ending Date:	Hours/W	/eek:
Job Description:			
F-1 students are not eligib	on that the student listed above ble to work more than 20 ho red during vacation periods, pr	urs per week while sc	hool is in session. Full-
On-campus employment for currently valid I-20.	F-1 students must be on the p	oremise of the school th	at issued student's
Hiring Official Name:	Title:		
Signature:		Date:	
I have verified that this st	oy International Stud udent is enrolled full-time, has the University of Washington.		VIS and is therefore eligible

Date: _