On-Campus Work Eligibility Form:  
For International Students on SMU Issued F and J Visas

International Students may be authorized to work on-campus. Students must be in good standing with the University and must maintain their visa status. It is the responsibility of the student worker to follow all rules and regulations regarding employment.

Authorization to work on-campus must be given to the student before employment begins. The United States Code of Federal Regulations states, “A non-immigrant who is permitted to engage in employment may engage in such employment as has been authorized. Any unauthorized employment by a nonimmigrant constitutes a failure to maintain status.” 8 C.F.R. § 214.1(e)

INTERNATIONAL STUDENT

<table>
<thead>
<tr>
<th>Family Name</th>
<th>First/Middle Name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SEVIS ID Number</th>
<th>SMU ID Number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Current Degree</th>
<th>Current Program Completion Date</th>
</tr>
</thead>
</table>

I understand that I am responsible for complying with my student visa regulations in addition to any applicable federal, state, and local laws and regulations as well as SMU’s policies regarding employment. I understand that a violation of my visa status may result in termination of my record and possible deportation.

- Students on F-1 Visas are eligible to work a maximum of twenty (20) hours of on-campus employment while school is in session, and more than 20 hours a week during university breaks (Summer and Winter).
- Students who are employed as a Teaching or Research Assistant may only have one active on-campus job at SMU.

______________________________  ______________________  __________
Printed Name  Signature  Date

SUPERVISOR: PLEASE COMPLETE THIS PORTION AND RETAIN COMPLETED FORM FOR DURATION OF EMPLOYMENT

STUDENT’S JOB TITLE _______________________________ SCHOOL / DEPARTMENT

PROPOSED START DATE ___________________ PROPOSED END DATE _______________ SMU EIN NUMBER (FEIN) 75-0800689

WEEKLY WORK SCHEDULE (HOURS PER DAY)  
MON. ___ TUE. ___ WED. ___ THU. ___ FRI. ___ SAT. ___ SUN. ___

TOTAL NUMBER OF HOURS PER WEEK __________________________

CANNOT EXCEED TWENTY (20) DURING FALL AND SPRING SEMESTER AND FORTY (40) DURING BREAKS

By signing below, I attest the above to be true and correct. I understand that it is the student’s responsibility to follow all rules and regulations regarding employment. I will contact ISSS with any questions regarding students’ eligibility to work.

SUPERVISOR’S NAME AND CONTACT INFORMATION

SUPERVISOR’S SIGNATURE ___________________________ DATE______________

FINANCIAL OFFICER CONTACT INFORMATION:

INTERNATIONAL STUDENT/SCHOLAR SERVICES OFFICE

Dates of Authorized on campus employment: From ___________________ To ___________________

Student is current on authorized Optional Practical Training in the field of ___________________ From ___________________ To ___________________

Approved by: ___________________

HR Confirmation of I-9 Completion

HR Representative Signature: ___________________  Date: ____________

--------------------