SMU | INTERNATIONAL STUDENT & SCHOLAR SERVICES
Tel: 214-768-4475 Fax: 214-768-1051 Email: isss@smu.edu

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)

BIOGRAPHICAL DATA (To be completed by the student)

Family Name	First/Middle Name
SEVIS ID Number	SMU ID Number
Current Degree	Current Program Completion Date

Has any of your personal information changed (U.S. address, phone number, etc.)? □ Yes □ No
If so, please update your information in Access immediately.

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:

The student is currently maintaining _____ status and is therefore eligible to work on campus from_____ to_____.
ISSS Specialist Name _____Signature and Date _____

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 a maximum of forty (40) 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.

Student Name:_____ Signature:_____ Date:___/___/___

HR Confirmation of I-9 Completion	HR Representative Signature:	Date: