

# CUNY INTERNATIONAL STUDENT STATUS EMPLOYMENT VERIFICATION FORM



**FOR INTERNAL CUNY USE ONLY**

(Verification of F-1 & J-1 Immigration Status Only for Students Sponsored by the Graduate Center-CUNY)

NAME OF STUDENT \_\_\_\_\_ PROGRAM \_\_\_\_\_  
Family Name Given Name

EMPL ID#: \_\_\_\_\_ Immigration Status: F-1 \_\_\_ J-1 \_\_\_ SEVIS Number N \_\_\_\_\_

I-20 or DS-2019 Valid Until \_\_\_\_\_ Final Semester: \_\_\_\_\_

**Student Statement:**

I understand that the total number of hours I may be employed, at all CUNY locations, is limited to 20 hours per week during semesters. I may work more than 20 hours per week during official vacation periods, provided that I do not deposit, graduate, or in any other way end or stop my full-time studies, or transfer from the Graduate Center, or in any way change my US Immigration Status.

At the beginning of my final semester at the GC, I understand that I should contact the Office of International Students to review my immigration status and to learn about all of the options that follow completion of my academic studies.

\_\_\_\_\_  
Student Signature Date

**To: CUNY Payroll or Human Resources Office**

This Form certifies that the student whose name appears above is registered full-time for the semester indicated and is maintaining valid F-1 or J-1 student Immigration Status at the Graduate Center-CUNY.

The total number of hours that the student may be employed at all CUNY locations may not exceed 20 hours a week during any semester. The student may work more than 20 hours a week during official vacation periods. The student is eligible to work within CUNY institutions only, for the period indicated below, incident to his or her Status, provided he/she does not complete studies, graduate, withdraw, or in any other way end or stop full-time registration, or change Immigration Status.

**Registration and On-Campus Employment Eligibility for the Above Named Student Are Verified for:**

<u>Semester Authorized until Date Indicated</u>	<u>Academic Level</u> (Ph.D. 1, 2, 3, or MA)	<u>Signature of DSO/ARO</u>	<u>Date</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____

**AUTHORIZED SIGNATORIES:**

- Linda Asaro, Director ● Paul Croser, International Student Counselor
- Bengisu Peker, International Student Counselor ● Heidi Rausch, International Student Counselor
- Arlene Carpio, Office Assistant

