



To Whom It May Concern:

This is evidence of on-campus employment for _____
Name of F-1 Student

Nature of student's job:

Start Date: _____ Number of Hours/Week: Less than 20 hours

Employer Contact Information

54-600-1756
Employer Identification Number

Employer telephone number

Student's Immediate Supervisor

Employer Signature _____

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DSO CERTIFICATION

This is to certify that the student is an F-1 student in good standing at James Madison University.

Delores Blough, Jonathan Kratz, Thomas Lavenir, Marlana Meikrantz, Date
Edward Muldoon, Designated School Officials