



**TheChicagoSchool<sup>®</sup>**  
of Professional Psychology



To Whom It May Concern:

This is to certify that \_\_\_\_\_  
(Name - F-1 Student)

has been offered general on-campus employment.

**Nature of Student's Job:**

\_\_\_\_\_  
\_\_\_\_\_

**Start Date:** \_\_\_\_\_ **Number of Hours/Week:** \_\_\_\_\_

**Employer Contact Information:** \_\_\_\_\_  
(Employer Identification Number – EIN)

\_\_\_\_\_  
(Employer Telephone Number)

\_\_\_\_\_  
(Student's Immediate Supervisor)

Employer Signature (Original): \_\_\_\_\_

Signatory's Title: \_\_\_\_\_

Date: \_\_\_\_\_