

Date of Letter: _____

To: Social Security Administration (Florida)

RE: Evidence of on-campus employment for F-1 student.

To whom it may concern:

In accordance with the Social Security Administration (SSA) *RM 10211.245* and *10211.310* this letter is to certify that:

_____ is an F-1 student attending Florida Polytechnic University.

The student has been offered, or is already working in, general on-campus employment.

Name of on-campus employer: **Chartwells Higher Ed**

Nature of student's job: _____

Start Date: _____ Job Title/Position: _____ Number of Hours/Week: _____

Employer Identification Number: **56-1874931**

Employer Address: **4700 Research Way, Lakeland, FL 33805**

Employer Telephone Number: _____

Name of Student's Immediate Supervisor: _____

Employer/Hiring Authority Signature (*original*): _____ Date: _____

Signatory's Title: _____

DSO Certification: *My signature below certifies I am the university DSO. I confirm the student named above is maintaining their status and eligible to work on-campus for up to 20 hours per week while classes are in session, and 20 hours or more during annual school breaks (i.e., summer, winter, and spring breaks).*

Name of Designated School Official (DSO): _____

DSO Signature: _____ **Date:** _____

DSO Telephone: (863) 874-8723 or 8499

Email: DSO@floridapoly.edu

Office Location: IST Room 2050