International Students & Scholars Office

Employment Evidence Form

Date: ____________________

To Whom It May Concern:

_________________________ is an international student at Smith College, EIN 04-1843040, Northampton, Massachusetts. This is evidence of on-campus employment.

On-Campus Employer /Office: _____________________________________________

Position type/name: ____________________________________________________

Start Date: _____________ _________________________________

Number of hours per week _______________ _______________________________

Student’s Immediate Supervisor: ________ _______________________________________

(Please Print)

Signature of Supervisor:  __________ _____________________________________

(please use blue ink)

Title of Supervisor:   _______________________________________________

Telephone Number:   ___ ____________________________________________