



Social Security Administration

1101 West Chester Pike

West Chester, PA 19382

GRADUATE ASSISTANTSHIP EMPLOYMENT VERIFICATION FORM

Section 1: To be completed by the Student's (Please Print)

Student's Name as stated in the Passport: _____

Student's University ID Number: _____

Place of Employment: **WEST CHESTER UNIVERSITY**

EMPLOYMENT IDENTIFICATION NUMBER FOR WEST CHESTER UNIVERSITY: 232417773

Nature of Student's Job: **Graduate Assistant**

Employment Start Date: _____ Number of hours per week: _____



Section 2: To be completed by the Designated School Official (DSO) in the Global Engagement Office

I verify that the above named student is enrolled as a full-time student at West Chester University.

Printed Name, DSO

Signature, DSO

Date (mm/dd/yyyy)