## ON-CAMPUS EMPLOYMENT VERIFICATION LETTER FOR SOCIAL SECURITY CARD APPLICATION PURPOSES UCSD International Center

(NOTE: Please issue letter on original UCSD department letterhead.)

## SAMPLE LETTER

2.	(Date)
To Whom It May Concern:	(====,
This is to verify that(Student Name)	is/will be employed at
the University of California, San Diego as a/an	(Title/Position or Nature of Employment)
in the Department of(Department Name)	for per week. (Number of Hours)
Employment began/Employment is expected t	o begin on(Month/Day/Year)
Employer Contact Information:	
(Employer Identification Number (EIN)) (95-6006144)	
(Employer Telephone Number)	
(Student's Immediate Supervisor)	
Sincerely,	
Employer Signature (Original) Signatory's Name and Title	

(IC201206)

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