



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) Center for International Programs**

*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)