To Whom It May Concern:

This is evidence of on-campus employment for _________________________________

Nature of student's job (e.g., wait staff, library aide, research assistant, etc.):

______________________________________________________________

Start date: ________________ Number of hours/week: ________________

52-600-2033 (Chartwells, etc. will have a different number)
(Employer Identification Number)

Employer contact information:

______________________________________________________________

(Employer telephone number)

______________________________________________________________

(Printed name of student's immediate supervisor)

Sincerely,

______________________________________________________________  _________________________
Supervisor's signature (original)                          Date

______________________________________________________________
Supervisor's Title

*** Section below to be completed by ISSO ***

This is to certify that ________________________________ is a full-time, F-1 student attending Towson University.

______________________________________________________________  _________________________
Designated School Official signature                          Date

______________________________________________________________
(Leave space for the DSO's stamp)                             Phone