

Loma Linda University Employer Certification

This is to certify that (**Name of F-1 Student**) _____
has been offered on-campus employment at Loma Linda University.

Nature of on-campus employment (e.g., library assistant, research assistant, etc.): _____

Start Date: _____ Anticipated end date: _____ Number of Hours/Week: _____

Employer information: LLU Employer Identification Number (EIN): 95-1816009

Employer's Telephone Number: _____

Immediate Supervisor: _____

Employer Signature (Original): _____

Employer's printed name: _____

Signatory's Title: _____

Date: _____

Loma Linda University Designated School Official (DSO) Certification

I certify that the above named student has been maintaining his/her **F-1 Student** immigration status and is eligible, immigration-wise, to accept this on-campus employment offer.

DSO Signature (Original): _____

DSO's printed name: _____

International Student & Scholar Services, 11139 Anderson St., SSC-1201, Loma Linda, CA 92350-1735

Date of DSO's certification: _____ DSO's phone number: (909)558-4955

Student's SEVIS ID#: _____