Employment Authorization for J-1 Visa Students

Winter 2012
Eligibility for J-1 Employment

- Good academic standing & valid visa status
- Authorized in SEVIS before employment begins
- Two types of employment:
  - On-campus
  - Academic training
Social Security Number Needed?

- A Social Security number is needed for paid employment
- Bring to IEP Office a letter from your employer
  - We will give you a letter to take to SSA office
- Apply at Social Security Office in SLO
Social Security Number Needed?

- Bring to SS office in SLO:
  - Letter from IEP
  - DS-2019
  - Passport
  - I-94 card
  - Complete application form at SSA office

- Takes about 2 weeks for card to arrive in mail
Social Security Application

Take all immigration documents and letter from IEP to SSA office in SLO

Wait about 2 weeks for card to come in the mail
J-1 On-Campus Employment

- Can start work during first quarter
- Up to 20 hours per week during academic quarter
- Over 20 hours per week during school breaks
How to Apply

- Get letter of offer from on-campus employer
- Bring On-Campus Work Report form to IEP
- SEVIS must be updated with employment details before first day of work
On-Campus Work Form

J-1 Student On-Campus Work Form

J-1 visa students are required to report their on-campus work information to IEP so that it can be reported in SEVIS. Students must keep IEP updated with any changes to this information.

Student Name: ____________________________ Student ID: _______________________

Location of Employment:
(example: El Corral Bookstore, Campus Dining, Kennedy Library, Biology Dept.)

Building & Room Number: ____________________________

Your position or title: ____________________________

Supervisor Name: __________________________________

Supervisor Title: __________________________________

Supervisor Phone Number on Campus: ____________________________

Number of Hours of Work Per Week: ____________________________

Begin Work Date: ____________________________ End Work Date: ____________________________

Check if this job an ___ Assistantship ___ Fellowship ___ Scholarship

Student Signature: ____________________________ Date: ____________________________
What is Academic Training?

- Training directly related to field of study on DS-2019 form
- Training can be paid or unpaid
- During or after studies
- Enrollment to do Academic Training not required
Academic Training Time Limit

- DS-2019 must be extended before current program end date expires
- Employment start date
  - No later than 30 days after program completion date
- Can not exceed time spent in non-degree program (study + training = up to 24 months)
Academic Training Requirements

- Must show proof of funds if extending time
- Must notify IEP of any address changes during training time
- Health insurance required
How to Apply for Academic Training

- Bring to IEP office:
  - Employers “offer of employment” letter with exact dates of employment and brief job description
  - Name and address of employer
  - Supervisor’s name & contact info

- Letter of recommendation from Cal Poly Exchange Coordinator or Advising Center Staff
Approval Process

- IEP extends your SEVIS record and updates it with employment information
- IEP prints a new DS-2019 with Academic Training extension
**I-9 Employment Eligibility Form**

Your employer will provide you with this form to complete and hand in to them.

---

### Section 1. Employee Information and Verification

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Name</td>
<td>[Enter name]</td>
</tr>
<tr>
<td>First Name</td>
<td>[Enter name]</td>
</tr>
<tr>
<td>Middle Initial</td>
<td>[Enter if applicable]</td>
</tr>
<tr>
<td>Maiden Name</td>
<td>[Enter if applicable]</td>
</tr>
<tr>
<td>Address (Street Name and Number)</td>
<td>[Enter address]</td>
</tr>
<tr>
<td>City</td>
<td>[Enter city]</td>
</tr>
<tr>
<td>State</td>
<td>[Enter state]</td>
</tr>
<tr>
<td>Zip Code</td>
<td>[Enter zip code]</td>
</tr>
<tr>
<td>Social Security #</td>
<td>[Enter number]</td>
</tr>
</tbody>
</table>

**I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.**

**Employee's Signature:**

**Preparer and/or Translator Certification:**

(To be completed and signed if Section 1 is prepared by a person other than the employee.)

- [ ] A citizen or national of the United States
- [ ] A lawful permanent resident (Alien # A...)
- [ ] An alien authorized to work (Alien # or Address #...)

**Preparer's/Translator's Signature:**

**Address (Street Name and Number, City, State, Zip Code):**

**Date (Month/day/year):**

---

### Section 2. Employer Review and Verification

**Document Title:**

**Issuing Authority:**

**Document #:**

**Expiration Date (Month/day/year):**

**Document #:**

**Expiration Date (Month/day/year):**

**CERTIFICATION:** I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on [Month/day/year], and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment.)

**Signature of Employer or Authorized Representative:**

**Date (Month/day/year):**

---

### Section 3. Reverification

**A. Name (If applicable):**

**Date of Birth (Month/day/year):**

**B. Date of hire (Month/day/year):**

**C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility:**

**Document Title:**

**Document #:**

**Expiration Date (Month/day/year):**

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

**Signature of Employer or Authorized Representative:**

**Date (Month/day/year):**

---

**Print Date:** 18-25-19
U.S. Income Tax Seminar for International Students and Scholars

Tuesday, February 7
5:10 – 6pm
Bldg. 38, Room 226
Dr. Janice Carr, CPA
VITA Program–Free Tax Preparation
by Cal Poly Accounting Students

Saturdays until March 10th
11am -2pm
Cal Poly, Building 3, Second Floor
Bring W-2 & Social Security Card
For more info call (805) 756-2667
Contacts and Online Help

- **Web page:** [iep.calpoly.edu](http://iep.calpoly.edu)
  - Click International Students>Work Authorization

- **Judy Mitchell**
  **International Student Advisor**
  Approves and recommends all work authorization
  [jumitche@calpoly.edu](mailto:jumitche@calpoly.edu)  756-5837  Room 38-107

- **Susan Tripp**
  **SEVIS Specialist**
  Reviews your application materials
  Reports address changes to SEVIS and DHS
  [sltripp@calpoly.edu](mailto:sltripp@calpoly.edu)  756-7535  Room 38-210