

**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**

\_\_\_\_\_  
(Date)

To Whom It May Concern:

This is to verify that \_\_\_\_\_ is/will be employed at  
(Student Name)

the University of California, San Diego as a/an \_\_\_\_\_  
(Title/Position or Nature of Employment)

in the Department of \_\_\_\_\_ for \_\_\_\_\_ per week.  
(Department Name) (Number of Hours)

Employment began/Employment is expected to 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

(IC200801)