

Curricular Practical Training Employer Verification Form FSU Panama City

Prior to engaging in employment or an internship, this student requires authorization from Florida State University's Designated Student Officer (DSO). Please provide the information below so that we can evaluate the student's eligibility and have the details required for an authorization. When authorization is granted, the DSO will notify the employer via email to the address in the signature box below. The student may only engage in the employment/internship during the dates authorized on Page 2 of the student's I-20 Certificate of Eligibility for Nonimmigrant Student Status. Company Name: Physical Address: Employment Information Proposed Position Title: Position Description and Duties: End date of employment: Hours per week: Paid: Yes No The employer agrees to cooperate with the school in achieving the curricular purposes of the employment/ training. I confirm that the information provided on this form is true and accurate and I understand that the student requires authorization prior to beginning employment/internship. Supervisor or HR Representative: Email: Signature: Signature:	Student's Full Name:
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	Supervisor or HR Representative:Title:
Signature:	Phone Number: Email:
	Signature:

Submit all forms to the Designated Student Official (DSO), Irvin Clark, EdD, <u>iclark2@pc.fsu.edu</u> (850) 770- 2101 Office of the Dean • Holley A-311-C • 4750 Collegiate Drive • Panama City • Florida • 32405-1099