



## SSR Request Form

Student Name: \_\_\_\_\_

CUNY ID \_\_\_\_\_ SEVIS # \_\_\_\_\_

**Request Type** (check all that apply):

- Off-Campus Employment
- Off-Campus Employment Hours per Week Expansion beyond the 20-hour per week limit
- Reduced Course Load (only available if requesting employment with hours per week expansion)

### Off-Campus Employment

If requesting off-campus employment, students need to provide their requested dates of employment.

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

### Student Agreement

By signing this form, I affirm the above information is correct. In addition, I acknowledge my understanding of the following:

- I must submit the application for off-campus employment to USCIS within 30 days of the recommendation issued on my I-20 by my OISSS advisor.
- I cannot begin off-campus employment until I receive the Employment Authorization Document from USCIS.
- Reduced Course Load (only available if requesting employment with hours per week expansion)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_