

September 22, 2004

Social Security Administration
3131 Sheridan Drive
Amherst, NY 14226

To Whom It May Concern:

This document is issued to certify that NAME, date of birth _____, a citizen of _____, is in F-1 Student Visa status, is enrolled in a full course of study at Buffalo State and is thereby authorized to work on campus up to twenty (20) hours per week while school is in session and full-time during school breaks (summer vacation, winter and spring breaks). He/She has been offered a job on campus and needs a social security number.

The employer on campus is (Office/Department) and the responsibilities assigned to the student are as follows:

- List of duties
- List of duties
- List of duties

Attached is a letter from the campus employer.

If you should require more information, please do not hesitate to contact us.

Yours sincerely,

Dr. Jean F. Gounard
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