

Assistantship Authorization Application

Please <u>PRINT</u> your information below. This information will be used to update your SEVIS record & must be accurate. If we are not able to read your information, your information cannot be updated in SEVIS. <u>Students in</u> the English Language Institute (ELI) are not permitted for assistantships until in their program of study.

STUDENT SECTION: Please complete this section of the form if you are the student.

LAST Name: ______ First Name: _______

Banner ID: _____ Current I-20/DS-2019 End Date: ______

Visa type, excluding ELI students: _____ F-1 _____ J-1

UNCP Email ______ @uncp.edu Phone ______ Phone ____ Rights & Responsibilities 1) I will not work without prior approval from OGE & without the Assistantship Authorization Letter. 2) I will not work more than 20 hours a week, otherwise it will be a violation of my status. 3) I will only work on-campus, meaning UNCP will be issuing my paycheck. 4) I will only work from the first day of the semester until the last day, prior to exams. 5) I will not work past my program completion, which will be the last day of my last semester, prior to exams. 6) I will not delay my program of study for employment purposes. 7) I understand employment is secondary to the primary purpose of my status, which is to be a student. 8) I will work with the Payroll Office to complete all required employment forms. 9) I will obtain my Social Security Number (SSN), is needed. Student Signature: _____ Date: _____ **SUPERVISOR SECTION**: *Please complete this section of the form if you are supervising the assistantship.* This form is not to be used for On-Campus Employment. Sponsoring Department: _____Supervisor Name: _____ Supervisor Email: _____ Supervisor Phone: _____ Assistantship Start Date: Assistantship End Date: Please note: students can work only between the first day of the semester & the last day, prior to exams, each semester. Student must request a new approval for assistantships and submit a new assistantship form every semester & summer session. Number of hours per week: _____ Location of work: _____ Please note: F-1/J-1 students are not permitted to participate in an assistantship more than 20 hours a week. If 20 hours a week is exceeded it will be considered a violation of status & the student's SEVIS record will be terminated. Supervisor Signature: _____ Date: _____