Types of Employment:

As an ISEP-sponsored J-1 exchange visitor, you may request authorization for employment under the following circumstances: **All employment is limited to no more than 20 hours per week during the academic term.**

- **On-Campus Assistantships or Fellowships:** You may be employed on-campus pursuant to the terms of a scholarship, fellowship or assistantship.

- **On-Campus Employment:** During your placement period, you may pursue part-time, on-campus employment if all of the following conditions are met:
  - This employment will not cause you to reduce your course load below full-time student status.
  - ISEP has issued a formal letter authorizing employment for you before you begin work.

- **Off-Campus Employment:** During your placement period, you may pursue part-time, off-campus employment if all of the following conditions are met:
  - Such employment is required by an unforeseen urgent financial need that has arisen since you entered the United States.
  - This employment will not cause you to reduce your course load below full-time student status.
  - ISEP has issued a formal letter authorizing employment for you before being work.

Students authorized to work up to 20 hours per week during their exchange period are permitted to work full time during vacations periods.
HOW TO REQUEST EMPLOYMENT AUTHORIZATION

□ Complete the ISEP Employment Authorization Request Form. Incomplete forms will be returned to you with no action taken. Be sure to provide detailed information on the prospective employment and the reason for requesting work authorization.

□ Bring the completed form, together with your passport, DS-2019, and I-94 Arrival/Departure Record, to your host institution coordinator. Your coordinator will verify that your exchange visitor status is in order and will discuss your request for employment with you.

□ Your host institution coordinator will sign the request form and indicate whether he/she approves the request. The original form is then forwarded to ISEP.

□ After reviewing your request, ISEP will notify your host coordinator in writing whether your request has been granted and will provide you with the necessary documentation. Remember that you are not allowed to work until ISEP sends you written authorization. Working without written approval from ISEP is in direct violation of U.S. law.

PLEASE NOTE:

All original applications must be sent to ISEP central.

ISEP will process work authorizations once a week and will send a reply via regular mail. We will not send authorizations via fax nor will we handle “rush” requests.
EMPLOYMENT AUTHORIZATION REQUEST FORM

To be Completed by the ISEP Participant

Name: _____________________________________________________________

Home Institution: _____________________________________________________

Host Institution: _______________________________________________________

I request authorization to pursue part-time employment (not to exceed 20 hours per week) as described below. I agree that this employment will not cause me to reduce my program of studies below full-time student status.

Signature: ___________________________________________ Date: __________________

Employment Information: (all fields must be filled)

Employer Name: _______________________________________________________

Employer Address: _______________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Number of Hours per Week: __________________________________________

Employment Begin Date: _____/_____/_______ End Date: _____/_____/_______

Employment Type: [ ] On Campus [ ] Off Campus

On Campus Employment Details: (Position/Title)

Off-Campus Employment (based on unforeseen economic hardship)
Describe the significant change that has occurred in your financial status since entering the United States that warrants this off-campus employment authorization:

To be Completed by the Host ISEP Coordinator

I have discussed this student’s request for authorization to work and support this request. Furthermore, I have verified that the student’s exchange visitor status is in order; the student is enrolled full time, and is in good standing.

Signature: ___________________________________________ Date: __________________