

Date:

To: U.S. Social Security Administration

This is to certify that the following student has been offered on-campus employment at the University of Detroit Mercy (EIN: 38-1360586).

Student's Name:

Position Description:

Date Employment Begins:

Number of Hours per Week:

Supervisor's Name and Title:

Supervisor's Telephone Number:

Should you require further information please contact me.

Supervisor's Signature: _____