



## **OSU On-Campus Employment at an Educationally Affiliated Off-Site Location**

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ CWID: \_\_\_\_\_

**A. Instructions.** Provide a copy of the affiliation agreement to the ISS Office. Submit the original, completed form to the Human Resources office at the school/facility where you will work/conduct research. Keep a copy for your records.

**8 CFR 214.2 (f)(9)(i)** - On-campus employment must either be performed on the school's premises or at an off-campus location which is educationally affiliated with the school. In the case of off-campus locations, the educational affiliation must be associated with the school's established curriculum or related to contractually funded research projects at the post-graduate level. In any event, the employment must be an integral part of the student's educational program. Employment authorized under this paragraph must not exceed 20 hours a week while school is in session.

### **B. Certification of OSU faculty member with oversight of the Educational Affiliation Agreement.**

- As the OSU faculty with oversight of this OSU Educational Affiliation Agreement, I verify that it is associated with OSU's established curriculum or is related to contractually funded research projects at the post-graduate level.
- I understand that all out-of-state requests for remote work require additional review by University Human Resources. I will complete the [Alternate Work Agreement Form](#) and submit it to the appropriate [Human Resources Consultant](#).

Copy of Affiliation Agreement has been submitted to the ISS Office: YES NO

Academic Department: \_\_\_\_\_

Name (Please Print): \_\_\_\_\_ Phone: \_\_\_\_\_

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

### **C. Certification of OSU faculty advisor of the F-1 student participating in the Educational Affiliation.**

Name of Student Participating in Research/Employment: \_\_\_\_\_

Student's Degree Program: \_\_\_\_\_

Participation start date (MM/DD/YYYY): \_\_\_\_\_

Participation end date (MM/DD/YYYY): \_\_\_\_\_

Name of off-site work location: \_\_\_\_\_

Related Coursework (indicate course code if applicable): \_\_\_\_\_

Description of the integral nature between this affiliation and the student's educational program:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I verify that participation in this educational affiliation is an integral part of the student's educational program.**

Academic Department: \_\_\_\_\_

Name (Please Print): \_\_\_\_\_

Academic Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **D. Certification of OSU ISS Designated School Official.**

I verify that the above student is an F-1 student maintaining status at OSU. The student is authorized to work up to 20 hours per week while school is in session and up to 40 hours per week during official school breaks. Per the above regulation, this authorization extends to the above off-site location to perform duties required by an approved affiliation agreement or research project.

Name \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_