

## **Academic Work Placement Form**

A. Type of Request (please select one):	
Initial Request	Change of Employer/Position
Change of Program	Change of Education Level
Readmission to HU	Other:
B. Student Information:	
Student ID#:	Visa Status:
First Name:	Last Name:
HU Program of Study:	
Address:	
City: State:	Zip:
<b>C. Statement:</b> Briefly describe how your work posi eligibility:	tion is related to the HU program of study to document

## D. Student Acknowledgement (Please review each statement and check all boxes):

If my active job position changes or I gain new employment during my studies, I understand that I must submit an updated Academic Work Placement Form to update my work placement status with HU.

If I change programs or education level, I understand that I must submit an updated Academic Work Placement Form based on the new Program of Study.

If my employment status changes resulting in no work placement during my enrollment, I understand that I must submit the Work Placement Waiver/Experience Form to update my work placement status with HU.

I understand that I must submit this form to the International Student Office (ISO) in order to obtain U.S. work authorization. I am <u>not</u> allowed to start working until I receive an I-20 with CPT work authorization.



E. Employment Information:			
Company Name:			
Student's Position Title:			
Address (Physical Location):			
City:	State:	Zip:	
Name of Contact Person or Supervisor:			
Contact Person or Supervisor's email:			
Job Description: *A job description letter is	preferred and can b	e submitted in lieu of provi	ding a description below.
F. Signatures:			
Please provide handwritten or electronic	signatures below 8	k date. ( <i>Typed signature</i> :	s are not accepted.)
Employer (Contact person or Supervisor) Signat	ture:		Date:
Student Signature:			Date:
G. Form submission (Please confirm of the latest processing of my request.			olds blank it will delay the
processing or my request.	,	rstand that if I left any fic	and statik it will delay the
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