

International Students: How to Get a Job On-Campus

Step 1— LOOK FOR A JOB

a. Check <https://trupositions.truman.edu/>



b. Read listings of jobs on TruPositions

Student Employment Position Listing

| Position Title | Location | I | S | W | Hours | Active | Applicants | Supervisors |
|---|-----------------------------------|---|---|---|-------|--------|------------|-------------------|
| Academic Success Mentor | Center for International Students | ✓ | ✓ | | 4.0 | 0 | | Nicole Stetler |
| CHAET Conversation Partners | Center for International Students | ✓ | ✓ | | 4.0 | 1 | | Nicole Stetler |
| CS Swan Member | Center for International Students | ✓ | ✓ | | 4.20 | 2 | | Nicole Stetler |
| Cultural Integration Leader (CIL) | Center for International Students | ✓ | ✓ | | 4.0 | 0 | | Nicole Stetler |
| Graphic Designer | Center for International Students | ✓ | ✓ | | 4.0 | 0 | | Nicole Stetler |
| International Admissions Office Assistant | Center for International Students | ✓ | ✓ | | 4.0 | 0 | | Brittney Robinson |
| International Ambassador (IA) international students only apply | Center for International Students | ✓ | | | 4 | 0 | | Nicole Stetler |
| Marketing and Public Relations | Center for International Students | ✓ | ✓ | | 4.0 | 0 | | Nicole Stetler |
| Office Assistant - Language Transition Specialist | Center for International Students | ✓ | ✓ | | 4.0 | 3 | | Brittney Robinson |
| Office Assistant- International Student Support | Center for International Students | ✓ | ✓ | | 4.0 | 0 | | Nicole Stetler |
| Photographer/Videographer | Center for International Students | ✓ | ✓ | | 4.7 | 0 | | Nicole Stetler |
| Writer - Recruitment Blog | Center for International Students | ✓ | ✓ | | 4.0 | 0 | | Brittney Robinson |

c. Sort for payment type

Payment Types

I = Institutional - Hourly pay that is ok for new and returning internationals

S = Scholarship Renewal - Available only your 2nd year to renew scholarship

W = Workstudy - US Federal aid for Americans only

STEP 2— APPLY FOR A JOB

- Submit an application at <https://trupositions.truman.edu/>.
- Apply for all jobs that interest you and have the payment type you require.
- Wait to be contacted for an interview.
- Check back with employer in 2-3 days in person or by email.
- Be hired and obtain a job offer letter—See Employer Letter below.

Sodexo Food Service and the Truman Bookstore qualify as on-campus jobs but NOT for scholarship renewal. They are not on TruPositions. Apply to each company directly.

STEP 3— APPLY FOR A SOCIAL SECURITY NUMBER

Social Security cards arrive in 7-10 days!

- To apply for a social security number do the following:
 - Pick up the “How to Get a Social Security Card” packet from the Center for International Students.
 - Get an “Employer Letter” from the department that hired you. See the example in the packet.
 - Request a “Social Security Letter” online from the Center for International Students at <https://international.truman.edu/current-students/>. Pick it up in 2-3 days.
 - Fill out the “Application for a Social Security Card” in the packet, or online, and print it. See the example in the packet.
 - Apply for a social security card at the Social Security Office, Monday through Friday 9-4.
- ⇒ +CILs can assist first year students. +Directions to the Social Security Office are in the packet. +Be sure to take your Employer Letter, Social Security Letter, completed Application for a Social Security Card, passport, I-20/DS-2019, and I-94.

DO NOT START WORK UNTIL ALL OF THESE STEPS ARE COMPLETED

Step 4— GET CLEARED TO WORK

Give ALL of the following documents to Payroll

- ⇒ W-4 & I-9 - Complete in TruView.truman.edu on the Student Tab under Student Employment. Print and submit forms to Payroll.
- ⇒ Social security card for copying
- ⇒ Passport, I-20 or DS-2019 and I-94 for copying
- Submit a Clearance form in TruView.truman.edu on the Student Tab under Student Employment.
- You will receive an email confirming your Clearance is approved
- Make sure your online Timecard is active on TruView.truman.edu>Student Tab>Student Employment
- Complete and submit your Timecard monthly!

Payroll Office
McClain Hall
105

How to Get a Social Security Card

****IMPORTANT: You may not apply more than 30 days before the start date of your employment as listed on your job offer letter. ****

1. **Confirm an on-campus job.**
2. **Request an Employer Letter** (Job Offer Letter) from your employer. *See example of job offer letter in packet. You can give this example to your employer.*
3. **Request Social Security Letter** on CIS website at: <https://international.truman.edu/current-students/>.
4. **Immediately take Employer Letter to the CIS.** CIS will make the Social Security Letter after receiving your Employer Letter. Allow 2-3 days for CIS to make the Social Security Letter.
5. **Complete the Social Security Application** in the packet. *See example in your packet.*
6. **Apply for the Social Security Card**
 - a. On-campus at the beginning of the semester (see dates on page 1) or at the Social Security Administration Office.
 - b. The office is not walking distance so contact
 - c. Ask your CIL or a friend to drive you at their earliest convenience.
7. **Carry all documents with you to apply for the card:**
 - Completed Social Security Application
 - Employer Letter
 - Social Security Letter from CIS
 - Passport & Visa
 - I-94
 - I-20 OR DS-2019
8. The Social Security Card will arrive to your personal address.
9. You will not have access to a timecard on TruView until you get your Social Security Card.
10. Take the Social Security Card to Payroll immediately after picking it arrives.

Address:

Social Security Administration

1305 Crown Drive
Kirksville, MO

Hours:

Monday & Tuesday - 9:00 a.m.-4:00 p.m.
Wednesday - 9:00 a.m.-12: p.m.
Thursday & Friday - 9:00 a.m.-4:00 p.m.

Phone:

888-386-2705


Directions from Baldwin Hall (CIS)

➡ Turn right onto S Franklin St
492 ft _____

➡ Turn right onto E Normal Ave
0.6 mi _____

↩ Turn left onto S Baltimore St
1.1 mi _____

➡ Turn right onto Crown Dr
62 ft _____

↩ Turn left to stay on Crown Dr
 Destination will be on the left

Sample Social Security Application

Follow these guidelines when filling out your application:

Line 1 Required

Line 2 Use CIS address as shown on sample.

Line 3 Mark "Legal Alien Allowed To Work" (If F-1 or J-1)

Line 4 Required

Line 5 Optional

Line 6 Required

Line 7 Required

Line 8A Required

Line 8B Most international students' parents do not have American social security numbers. Leave blank if yours do not.

Line 9A Required

Line 9B Most international students' parents do not have American social security numbers. Leave blank if yours do not.

Line 10 Required

Lines 11-13 Only complete these if you answered 'Yes' on Line 10. If you answered 'No' or 'Don't Know' skip to line 14

Line 14 Required

Line 15 Use CIS telephone number which is (660) 785-4215

Line 16 Required

Line 17 Mark 'Self

SOCIAL SECURITY ADMINISTRATION Application for a Social Security Card

Form Approved
OMB No. 0960-0068

| | | | | | | |
|--|--|-----|-----|---|---|---|
| 1 | NAME TO BE SHOWN ON CARD → | | | First <u>Annie</u> | Full Middle Name <u>Elizabeth</u> | Last <u>Connor</u> |
| | FULL NAME AT BIRTH IF OTHER THAN ABOVE | | | First | Full Middle Name | Last |
| | OTHER NAMES USED | | | | | |
| 2 | MAILING ADDRESS → <small>Do Not Abbreviate</small> | | | Street Address, Apt. No., PO Box, Rural Route No. <u>100 E. Normal, Baldwin Hall 129</u> | | |
| | | | | City <u>Kirkville, MO</u> | State | ZIP Code <u>62501-</u> |
| 3 | CITIZENSHIP → <small>(Check One)</small> | | | <input type="checkbox"/> U.S. Citizen | <input checked="" type="checkbox"/> Legal Alien Allowed To Work | <input type="checkbox"/> Legal Alien Not Allowed To Work (See instructions On Page 2) |
| | | | | <input type="checkbox"/> Other (See instructions On Page 2) | | |
| 4 | SEX → | | | <input type="checkbox"/> Male | <input checked="" type="checkbox"/> Female | |
| 5 | RACE/ETHNIC DESCRIPTION → <small>(Check One Only - Voluntary)</small> | | | <input type="checkbox"/> Asian, Asian-American or Pacific Islander | <input type="checkbox"/> Hispanic | <input type="checkbox"/> Black (Not Hispanic) |
| | | | | <input type="checkbox"/> North American Indian or Alaskan Native | <input checked="" type="checkbox"/> White (Not Hispanic) | |
| 6 | DATE OF BIRTH → <u>10/17/1991</u> <small>Month, Day, Year</small> | | 7 | PLACE OF BIRTH → <u>Springfield Missouri</u> <small>(Do Not Abbreviate) City State or Foreign Country</small> | | Office Use Only PCI |
| 8 | A. MOTHER'S NAME AT HER BIRTH → | | | First <u>Mary</u> | Full Middle Name <u>Bernadette</u> | Last Name At Her Birth <u>Stevenson</u> |
| | B. MOTHER'S SOCIAL SECURITY NUMBER → <small>(See instructions for 8B on Page 2)</small> | | | _____ - _____ - _____ | | |
| 9 | A. FATHER'S NAME → | | | First <u>George</u> | Full Middle Name <u>Edward</u> | Last <u>Connor</u> |
| | B. FATHER'S SOCIAL SECURITY NUMBER → <small>(See instructions for 9B on Page 2)</small> | | | _____ - _____ - _____ | | |
| 10 | Has the applicant or anyone acting on his/her behalf ever filed for or received a Social Security number card before? <input type="checkbox"/> Yes (If "yes," answer questions 11-13.) <input checked="" type="checkbox"/> No (If "no," go on to question 14.) <input type="checkbox"/> Don't Know (If "don't know," go on to question 14.) | | | | | |
| 11 | Enter the Social Security number previously assigned to the person listed in item 1. → | | | _____ - _____ - _____ | | |
| 12 | Enter the name shown on the most recent Social Security card issued for the person listed in item 1. → | | | First | Middle Name | Last |
| 13 | Enter any different date of birth if used on an earlier application for a card. → | | | _____ Month, Day, Year | | |
| 14 | TODAY'S DATE → <u>06/10/14</u> <small>Month, Day, Year</small> | | 15 | DAYTIME PHONE NUMBER → <u>(660) 785-4215</u> <small>Area Code Number</small> | | |
| I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, and it is true and correct to the best of my knowledge. | | | | | | |
| 16 | YOUR SIGNATURE <u>Annie E. Connor</u> | | | 17 YOUR RELATIONSHIP TO THE PERSON IN ITEM 1 IS: <input checked="" type="checkbox"/> Self <input type="checkbox"/> Natural Or Adoptive Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other (Specify) | | |
| DO NOT WRITE BELOW THIS LINE (FOR SSA USE ONLY) | | | | | | |
| NPN | | DOC | | NTI | | CAN |
| PBC | | EVI | EVA | EVC | PRA | NWR |
| | | | | | | DNR |
| | | | | | | UNIT |
| EVIDENCE SUBMITTED | | | | SIGNATURE AND TITLE OF EMPLOYEE(S) REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW | | |
| | | | | _____ DATE | | |
| | | | | _____ DATE | | |

SOCIAL SECURITY ADMINISTRATION Application for a Social Security Card

Form Approved
OMB No. 0960-0066

| | | | | | | | |
|---|--|---|---|---|--|---|------|
| 1 | NAME <small>TO BE SHOWN ON CARD</small> | First | Full Middle Name | Last | | | |
| | FULL NAME AT BIRTH IF OTHER THAN ABOVE | First | Full Middle Name | Last | | | |
| | OTHER NAMES USED | | | | | | |
| 2 | MAILING ADDRESS <small>Do Not Abbreviate</small> | Street Address, Apt. No., PO Box, Rural Route No. | | | | | |
| | | City | State | ZIP Code | | | |
| 3 | CITIZENSHIP <small>(Check One)</small> | <input type="checkbox"/> U.S. Citizen | <input type="checkbox"/> Legal Alien Allowed To Work | <input type="checkbox"/> Legal Alien Not Allowed To Work (See Instructions On Page 2) | <input type="checkbox"/> Other (See Instructions On Page 2) | | |
| 4 | SEX | <input type="checkbox"/> Male | <input type="checkbox"/> Female | | | | |
| 5 | RACE/ETHNIC DESCRIPTION <small>(Check One Only - Voluntary)</small> | <input type="checkbox"/> Asian, Asian-American or Pacific Islander | <input type="checkbox"/> Hispanic | <input type="checkbox"/> Black (Not Hispanic) | <input type="checkbox"/> North American Indian or Alaskan Native | <input type="checkbox"/> White (Not Hispanic) | |
| 6 | DATE OF BIRTH <small>Month, Day, Year</small> | 7 PLACE OF BIRTH <small>(Do Not Abbreviate)</small> City | | | Office Use Only | | |
| 8 | | A. MOTHER'S NAME AT HER BIRTH | | State or Foreign Country | FCI | | |
| | | First | Full Middle Name | Last Name At Her Birth | | | |
| 9 | | B. MOTHER'S SOCIAL SECURITY NUMBER <small>(See instructions for 8B on Page 2)</small> | | <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> | | | |
| | | A. FATHER'S NAME | | First | Full Middle Name | Last | |
| 10 | | B. FATHER'S SOCIAL SECURITY NUMBER <small>(See instructions for 9B on Page 2)</small> | | <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> | | | |
| | | Has the applicant or anyone acting on his/her behalf ever filed for or received a Social Security number card before? <input type="checkbox"/> Yes (If "yes", answer questions 11-13.) <input type="checkbox"/> No (If "no," go on to question 14.) <input type="checkbox"/> Don't Know (If "don't know," go on to question 14.) | | | | | |
| 11 | Enter the Social Security number previously assigned to the person listed in item 1. | <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> | | | | | |
| 12 | Enter the name shown on the most recent Social Security card issued for the person listed in item 1. | First | Middle Name | Last | | | |
| 13 | Enter any different date of birth if used on an earlier application for a card. | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | |
| 14 | TODAY'S DATE <small>Month, Day, Year</small> | 15 | DAYTIME PHONE NUMBER <small>() -</small> | | | | |
| | | Area Code | | Number | | | |
| 16 | YOUR SIGNATURE | | 17 YOUR RELATIONSHIP TO THE PERSON IN ITEM 1 IS: | | | | |
| | | <input type="checkbox"/> Self | | <input type="checkbox"/> Natural Or Adoptive Parent | <input type="checkbox"/> Legal Guardian | <input type="checkbox"/> Other (Specify) | |
| DO NOT WRITE BELOW THIS LINE (FOR SSA USE ONLY) | | | | | | | |
| NPN | | DOC | NTI | CAN | ITV | | |
| PBC | EVI | EVA | EVC | PRA | NWR | DNR | UNIT |
| EVIDENCE SUBMITTED | | | | SIGNATURE AND TITLE OF EMPLOYEE(S) REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW | | | |
| | | | | DATE | | | |
| | | | | DATE | | | |

International Student Affairs Office
(660) 785-4215
(660) 785-5395 FAX
<http://iso.truman.edu>
internat@truman.edu



Kirk Building 120
100 East Normal
Kirksville, MO 63501-4221
USA

Date _____

Re: Employment verification form to be completed by the employer and returned to the student employee.

Dear Social Security Administration:

(student name) has been offered employment by the
Department of Truman State University beginning on
(start date of employment). The duties of this position include
the following: _____

The student will work _____ number of hours per week.

The Employer ID Number for Truman State University is 43-6005833

Sincerely,

Supervisor's Name _____

Supervisor's Telephone Number _____

Supervisor's Email _____