FACULTY OF GRADUATE STUDIES

REQUEST FOR WORK AUTHORIZATION for
INTERNATIONAL GRADUATE STUDENT ON-CAMPUS EMPLOYMENT

TO BE COMPLETED BY THE CHAIR/DEAN/DIRECTOR OF THE ACADEMIC UNIT IN WHICH THE STUDENT IS EMPLOYED:

Student Name: _____ _____ _____
(First) (Middle) (Last)

Student #_____ **Home Department:** _____

Hiring Department: _____

Nature of Work:
Research Assistantship ( )
Teaching Assistantship ( )
Co-op Work Term* ( )
Practica ( )
Other -- please specify _____

_____

_____

* Is the Co-op Work Term essential to the program (Yes ☐ No ☐)

I confirm that the student's home department is aware of this employment and the student is registered full-time and intends to remain with their home department until at least _____
(MM-DD-YYYY)

HIRING DEPARTMENT CHAIR/DEAN/DIRECTOR:

Name:_____

Signature:_____**Date:**_____

PLEASE RETURN FORM TO THE FACULTY OF GRADUATE STUDIES
UNIVERSITY CENTRE ROOM **A207, 721-7970.**

Complete this form and email, fax, or mail it to the Dean's office. It will generate a confirmation email (from the Dean's office) for full time registration for International Graduate Students who are employed on campus. When your (hiring department) receives this confirmation letter from the Dean's office, please forward the original/fax to Human Resources with a copy of the student's Student Visa from Immigration Canada.

http://web.uvic.ca/gradstudies/pdf/Work_Authorization_form.pdf

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