



F-1 STUDENT:
Penn Netter Center CSSP Position
at Off-Campus Location

NOTE: Do not begin the Penn Netter Center CSSP positions prior to receiving authorization from ISSS.

Part A: Penn Netter Center's Recommendation (completed by full-time Penn staff)

Student's Last Name: _____ First Name: _____

Check one of the following (and **attach evidence and/or a letter explaining in detail**):

- ☐ The student's off-campus location is educationally affiliated with University Pennsylvania, provided that it is associated with the University's established curriculum; or
- ☐ The CSSP activities are related to contractually funded research projects at the post-graduate level

Netter Center Program: _____

Anticipated Dates of Employment: From: _____ To: _____

Off-campus location name and full address: _____
If more than one off-campus location, attach separate documentation with the list of the site names, full addresses, and dates.

Name of Netter Center Staff: _____ Signature: _____

Campus Phone #: _____ E-mail: _____

Part B: F-1 Student Information (completed by Student)

Date of Birth: _____ e-mail: _____

Are you currently employed on campus? ☐ No ☐ Yes Are you currently employed off campus? ☐ No ☐ Yes

- I have maintained valid F-1 status since I began my study at the University of Pennsylvania.
- I understand that I must report to ISSS any change to my name and address within 10 days.

Signature of Student: _____ Date: _____

NOTE: Bring a copy of your passport pages (biographical data, photo, and expiration date), I-94 card, and I-20 when meeting with an ISSS advisor.

Part C: ISSS Authorization (completed by ISSS Advisor)

☐ **Approved** ☐ **Denied** for the following reason(s): _____

Name of ISSS DSO/PDSO: _____

Signature of ISSS DSO/PDSO: _____ Date: _____

***This authorization is valid only for the aforementioned opportunity and dates.
Any changes will require new authorization from an ISSS advisor.***