Florida

APPLICATION FOR ECONOMIC HARDSHIP EMPLOYMENT AUTHORIZATION

Name of Applicant _____ Student ID Number _____

Country of Citizenship _____ Date of Birth _____

Please provide ISSS with a written statement explaining your unforeseen hardship circumstances, e.g., natural disaster resulting in loss of family dwelling and resulting impact to family/business, loss of a family member, etc.

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In reference to my application for economic hardship, I understand this part-time authorization for o□-campus employment is only valid for the dates requested on my application, and that I plan to remain enrolled as a full-time student at Florida Tech for the duration of my program of my study.

If for some reason, I should withdraw or transfer from Florida Tech, I understand the employment authorization will become null and void, and I will be obligated to cease all o□-campus employment.

Signature _____ Date _____