Office of the Registrar

Designated School Official for

Nonimmigrant Matters

2300 Adams Avenue

Scranton, PA   18509

Phone: (570) 348-6280

Fax: (570) 961-4758

E-mail: registrar@maryu.marywood.edu

Website: www.marywood.edu

Marywood
U N I V E R S I T Y
Lead On.

F-1 SEVERE ECONOMIC
HARDSHIP REQUEST

Eligibility Criteria for Severe Economic Hardship

You are eligible to apply for employment based on severe economic hardship if:

- You have been in F-1 status for one full academic year
- You are in good academic standing and are pursuing a full course load
- Employment will not interfere with your studies
- You can demonstrate that the employment is necessary to avoid severe economic hardship due to unforeseen economic circumstances beyond your control

Student Information

_____

Last Name (Surname)   First Name   Middle Name

_____

Street Address   City   State   Postal Code

(_____)_____   _____   N __ __ __ __ __ __ __ __ __ __
Preferred Contact Phone Number   E-Mail Address   SEVIS ID Number (Must be eleven digits)

Requested Employment Begin Date: _____/_____/_____   Requested Employment End Date: _____/_____/_____
                                 MM   DD   YY   MM   DD   YY

I have been in F-1 status for a minimum of one academic year: ☐ Yes   ☐ No

Checklist of Required Documentation

- ☐ Personal statement outlining the reason you are applying for employment based on severe economic hardship.
- ☐ Financial or other documentation which supports the claim(s) made in your personal statement.
- ☐ Completed Form I-765 (available at www.uscis.gov) using the code (c)(3)(iii) in item 16. Do not sign or date the form until your appointment with our office.
- ☐ Copies of your current and previous Forms I-20.
- ☐ Copy of the front of your latest I-94 card.
- ☐ Copy of your F-1 visa page (except Canadians) or Form I-797 (approval of change of status to F-1, if applicable).
- ☐ Copy of unofficial transcript (available via your student account on www.marywood.edu).

Student Certification

I affirm that I have read and understand the request information and instructions and certify that the information I have provided is accurate to the best of my knowledge.

_____

Signature of Student   Date

—————————————————————— **Office Use Only** ——————————————————————

Initials: _____   Date Processed: _____/_____/_____