



MONTANA STATE UNIVERSITY BILLINGS
OPT EMPLOYER INFORMATION

Employer Information:

Once you have been offered a position, complete this form and submit it to the DSO, along with an official letter of employment. *If you have changed your physical address, please inform the DSO immediately of your new address, as well as any changes to your email or phone number.*

Name of Employer/Company: _____

Employer's Contact Information:

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Supervisor's Name: _____ Supervisor's Position: _____

Supervisor's Phone: _____ Supervisor's E-mail: _____

(Employer E-Verify #, *if STEM Graduate*): _____

Employee's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

The Letter of Employment should be on official company/organization letterhead (*if available*) and should include the following:

- Student's full name
- Position offered
- Salary offered
- Hours of work expected
- Start and end dates
- Overview of general duties and tasks
- Supervisor's contact information (address, phone, email)
- **Signed by the direct supervisor and dated**