

Economic Hardship Employment Application

F-1 students experiencing severe and unforeseen financial hardship while studying in the U.S. may be able to obtain off-campus Economic Hardship Employment authorization from USCIS. Review the information at www.elgin.edu/international for information on eligibility and filing with USCIS.

By completing this form, I seek Elgin Community College's recommendation for Economic Hardship Employment Authorization:

Name: _____ Student ID: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Start Date at ECC: _____ Anticipated Graduation Date at ECC: _____

Briefly outline why employment is necessary to avoid severe economic hardship due to unforeseen economic circumstances:

Required Documentation

- ☐ Completed [Form I-765 Application for Employment Authorization](#). Use (C)(3)(iii) in the *eligibility category* boxes on the form. Do not date the form until you are ready to send the application to the U.S. Citizenship and Immigration Services (USCIS). Use an address where you can receive mail for the next several months.
- ☐ A personal letter addressed to USCIS detailing the unforeseen circumstances causing the economic hardship and why on-campus employment opportunities are unavailable or insufficient; include supporting evidence.
- ☐ Supporting documentation of the economic hardship, such as a letter detailing a sponsor's loss of employment, proof of currency devaluation, copies of medical bills, or loss of a scholarship.
- ☐ Copy of passport identity page
- ☐ Copy of current and previous I-20s
- ☐ Copy of current I-94
- ☐ Copy of F-1 visa or I-797 (approval of change of status to F-1), if applicable
- ☐ Copy of your ECC unofficial transcript



By signing below, you confirm that you are currently experiencing a serious and unexpected financial hardship while studying in the United States and are requesting Economic Hardship Employment Authorization through USCIS. You understand that approval is not guaranteed and is subject to the discretion of USCIS.

You acknowledge that, if approved, employment under this authorization is limited and is not intended to cover the full cost of your education or living expenses. You agree to comply with all eligibility requirements, terms, and conditions of the program.

You also understand that your employment authorization will become invalid if your SEVIS record is terminated or transferred, or if you fail to maintain your F-1 status. Policies governing this benefit may change at any time without notice. Submission of this request does not guarantee approval.

Signature: _____ Date: _____