

**J-1 Scholar Employment Authorization for Occasional Lectures or Consultations**Revised  
1/16

Today's Date: \_\_\_\_\_ Campus:  Main Campus (UPC)  
 Health Science Campus

Family/Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

USC E-mail address: \_\_\_\_\_

Local U.S. Address: \_\_\_\_\_

**J-1 Category**

Research Scholar       Professor       Short-term Scholar

**Important Note**

If wages or other remuneration are received by the Exchange Visitor for occasional lectures or consultations, the Exchange Visitor must act as an independent contractor for Form I-9 purposes.

**Occasional Lectures or Consultation Information**

- Offer letter from non-USC employer is required
- Please also verify the following information from the offer letter:

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Period of Employment: From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 (MM) (DD) (YYYY) (MM) (DD) (YYYY)

Part-Time       Full-Time

Amount of Compensation: \$ \_\_\_\_\_ per \_\_\_\_\_

Field or subject of activity: \_\_\_\_\_ (ex: Business Administration, Chemistry, etc.)

Brief Description: \_\_\_\_\_

**Approval Signature**

As the USC sponsoring faculty member, I certify the following:

- 1) The proposed employment is directly related to the objectives of the Exchange Visitor's program;
- 2) The proposed employment is incidental to the Exchange Visitor's primary program activities; and
- 3) The proposed employment will not delay the completion date of the Exchange Visitor's program.

Sponsoring Faculty Member Name	Sponsoring Faculty Member Signature	Date
Department	E-mail	Phone