

Work & Travel USA

Employment Offer Agreement Form Winter 2008/2009



Name of CIEE Representative:

Country:

Interviewed by (name):

Representative Code:

Date (day/month/year):

Please fill in form using all capital letters.

Employer Section

Company Name:

Street:

City: State: Zip:

Phone: Fax: TaxID:

Website: How many international students do you intend to hire?:

Offer made to Please fill out one application per student.

First name: Middle initial:

Last name:

Job Information

Worksite address (if different from above) Street:

City: State: Zip:

Dates of employment: from (DD/MM/YYYY): to (DD/MM/YYYY): Maximum of four (4) months

Manager's name: Manager's phone:

Manager's e-mail: Off season phone:

Student job title: Job description:

Wage per hour: Average number of hours per week:

Is an end of season bonus available? Yes No If yes, how much:

Does employer provide housing? Yes No If yes, cost of housing:

Housing deposit: Type of accommodation (house/hotel/etc):

How many people share room?: How many people share house?: Is housing furnished?:

The student named above has been offered a temporary position with the company by an authorized company representative and the salary and other terms are commensurate with those of his/her US counterparts. I have reviewed the attached Employer Declaration and agree to abide by its terms. (If an Employer Declaration was not provided, please contact CIEE at 1.888.268.6245 or visit www.ciee.org/employer/declaration.)

Name of person completing this form: Title:

Signature: Date (DD/MM/YYYY):

Are you an employee of the company listed above? Yes No

If no, please complete Company name: Telephone:

Are you an Employment agency Staffing company Other:

Work & Travel Participant Section

By signing below, I indicate my understanding and agreement with the following terms:

1. Any position offered to me is not a firm, irrevocable offer and may be revoked at any time before I commence employment. In the event that the employer revokes this offer, CIEE will assist me in my effort to find alternative employment, but CIEE makes no guarantee that its effort will be successful. I will be an employee-at-will, and my employment relationship may be terminated at any time by the employer.
2. I understand that it is my responsibility to consult the full Employer Profile for additional information on any CIEE-sourced job. The terms above are general in nature and my hours and duties are subject to change. I will report to the employer listed above within five days of arrival in the United States. I will work for a period that will not exceed the end date on my DS-2019 form. If I wish to change employers, I must receive permission from both CIEE and my CIEE Representative prior to doing so.
3. I will adhere to all CIEE and CIEE Representative rules regarding employment and program participation, including the Terms and Conditions / Participant Declaration which forms part of my program application. Should I change jobs without receiving prior permission from CIEE and my CIEE Representative, or if I violate other CIEE or CIEE Representative rules, CIEE may terminate its sponsorship of me and I will be required to return home. I also understand that such termination may prevent me from receiving future US visas.

Name:

ATLAS ID:

Signature: Date (DD/MM/YYYY):

How did you find your job? CIEE Representative Employment Agency Directly with employer

Internet Other:

THE PARTICIPANT MUST SEND THE ORIGINAL SIGNED AGREEMENT TO HIS/HER CIEE PARTNER.

THE PARTICIPANT MUST ALSO SEND A COPY TO THE EMPLOYER AND KEEP A COPY FOR HIS/HER OWN RECORDS.