

SUMMER WORK & TRAVEL 2009
JOB OFFER

(PARTICIPANTS NAME)

COMPANY INFORMATION:

Company Name: _____
Company Address: _____
City, State, Zip Code: _____
Supervisor/Manager Name: _____
Title: _____
Telephone: _____
Fax: _____
E-mail: _____
Website: _____

JOB INFORMATION:

Dates of Employment: _____
Job Title: _____
Brief Description: _____
Starting wage: _____
Average hours per week: _____ Overtime: YES NO
Frequency of pay: Every week Every two weeks Other _____
Is employee housing available: YES NO Cost of housing: _____
Other details on housing: _____

Note to Employer:

By completing and signing this form you are agreeing to hire the above international student on a temporary basis for the duration of time indicated above. The above-named student is participating in the ICES Summer Work and Travel Program. All information provided must be complete and accurate, providing false information is a violation of the Department of State Exchange Visitor Program regulations.

Employer Name

Signature

Date

Participant agreement to terms of employment:

I accept to the above job offer and the terms of employment. I understand that the conditions of my employment may change based on the needs of my employer and any other unavoidable circumstances.

Participant Name

Signature

Date