



# Summer Work Travel

## Employment Agreement Form 2010

| Employer Section  |               |                                  |                            |
|---|---------------|----------------------------------|----------------------------|
| Company Name  |               | Website                          |                            |
| Address   |               | City                             | State Zip                  |
| Phone   | Fax           | E-mail                           |                            |
| Tax ID  |               |                                  |                            |
| Off-season contact phone number (Nov-May)   |               |                                  |                            |
| How many international students do you intend to hire?  |               |                                  |                            |
| Offer made to (Please fill out one application per student).  |               |                                  |                            |
| Student Name  |               | Country of residence             |                            |
| Supervisor's Information  |               |                                  |                            |
| Name  |               | E-mail                           |                            |
| Work Phone  |               | Cell Phone                       |                            |
| Job Information   |               |                                  |                            |
| Worksite address (if different from above): Street  |               |                                  |                            |
| City  |               | State                            | Zip Telephone              |
| Dates of employment: From   |               | To                               | Maximum of four (4) months |
| Job title   |               | Job description                  |                            |
| Wage per hour   | Pay frequency | Average number of hours per week |                            |
| Is an end of season bonus available?  |               | If yes, how much?                |                            |
| Housing Information   |               |                                  |                            |
| Does employer provide housing?  |               | Cost of housing                  | Housing deposit            |
| Type of accommodation (house/hotel/etc)   |               | Is housing furnished?            |                            |
| How many people share room?   |               | How many people share house?     |                            |
| Is it a requirement for participant to stay in the housing arranged by employer?  |               |                                  |                            |
| If employer does not provide housing, how will the student be assisted in his/her housing search?   |               |                                  |                            |
| 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 U.S. counterparts. |               |                                  |                            |
| Name of person completing this form   |               |                                  | Title                      |
| Signature   |               |                                  | Date                       |
| Are you an employee of the company listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No   |               |                                  |                            |
| If no, please complete: Company name  |               |                                  | Telephone                  |
| Are you an: <input type="checkbox"/> Employment agency   <input type="checkbox"/> Staffing company   <input type="checkbox"/> Other:  |               |                                  |                            |
| Work & Travel Participant Section   |               |                                  |                            |
| Name  |               |                                  |                            |
| Signature   |               |                                  | Date                       |