



**Self Arranged Job Agreement Form**  
**Please Print Clearly**

I certify that \_\_\_\_\_, \_\_\_\_\_  
Last Name First Name  
D.O.B. \_\_\_\_\_ has been offered an employment position with the below  
Month/Day/Year  
named organization.

**I. Employer Information**

Company Name \_\_\_\_\_  
Year Company Established \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Title \_\_\_\_\_  
Company Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Location where student will work \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Company Website \_\_\_\_\_  
Please provide a detailed description of your company \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**II. Employment Details**

Available Job Title/Position \_\_\_\_\_  
Detailed Description of Job Responsibilities (if additional space is needed, please attach to this form) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Start Date: Earliest Possible \_\_\_\_\_ Latest Possible: \_\_\_\_\_  
End Date: Earliest Possible \_\_\_\_\_ Latest Possible: \_\_\_\_\_  
Starting wage \$ \_\_\_\_\_ per \_\_\_\_\_ Approximate # of hours per week \_\_\_\_\_  
Will overtime become possible?  yes  no (check one) at what wage? \$ \_\_\_\_\_  
Is there a bonus opportunity? \_\_\_\_\_  
How will the employees get to and from work? \_\_\_\_\_  
How and when will paychecks be delivered? \_\_\_\_\_  
How will final paychecks and W2 forms be delivered? \_\_\_\_\_  
\_\_\_\_\_  
Are uniforms required for this position?  yes  no (check one)  
What is the cost of a uniform? \_\_\_\_\_  
What special work clothing should each employee arrive with? (i.e. black shoes, tan pants)  
\_\_\_\_\_

**III. Housing**

Is housing available for this student?  yes  no (check one)

Address/Location of housing: \_\_\_\_\_

Cost of housing per week \$ \_\_\_\_\_

How will the student pay for housing? (i.e. payroll deduction) \_\_\_\_\_

Is a housing security deposit required?  yes  no (check one)

Amount of required housing security deposit due upon arrival? \_\_\_\_\_

Is the housing security deposit refundable?  yes  no (check one)

How and when will the housing will housing deposit be returned? \_\_\_\_\_

Will telephone and internet be supplied in the housing?  yes  no (check one)

Will linens be provided in the housing?  yes  no (check one)

What type of housing will be provided?(apartment/dorms/motel/etc.) \_\_\_\_\_

How many students will be placed in each bedroom? \_\_\_\_\_

Are the students required to live in employer organized housing for the duration of their employment?  yes  no (check one)

If housing is not provided, will you assist the student in finding suitable and affordable housing in your area?  yes  no (check one)

**I confirm that the above information is correct and that I am authorized to sign this document on behalf of the organization listed in section #1 of this document.**

Signature of Authorized Employer Representative \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

**Please note that all employers will be contacted by our office for verification before any visa documents will be issued.**

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