



The WISE Foundation  
Work and Travel Program  
Job Offer

All of the below information must be completed and the employer and participant must both sign this job offer. Fax completed job offers to WISE at 770-579-0219.

Participant's Name:

**Company Information**

Company Name:  Tax ID# (EIN):

Company Street Address (No PO Boxes):

City:  State:  Zip Code:

Supervisor/Manager:  Title:

Phone number:  Fax number:

Email:  Website:

Does the company maintain the required workers compensation insurance:  Yes  No

**Job Information**

Dates of Employment: Starting:  Ending:

Job Title:

Expected Duties:

Hourly Wage:  Average hours per week:  Overtime:  Yes  No

First paycheck received after how many weeks on the schedule:  Frequency of paycheck thereafter:

Does employer provide uniforms:  Yes  No Cost of uniform:

**Note to employer:**

Should any aspect of the site information change, you should inform WISE accordingly. You should provide participants with any documents you feel are necessary prior to their arrival.

Regulations governing the Summer Work Travel exchange program requires that sponsors shall advise program participants regarding Federal Minimum Wage requirements and shall ensure that the participants receive pay and benefits commensurate with those offered their American counterparts [22 CFR 62.32 (e)].

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 on the WISE Foundation 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.

By completing and signing this form, you certify that you are in compliance with the Fair Labor Standards Act and that the pay and benefits are commensurate with those offered American counterparts.

Employer's Printed Name:  \_\_\_\_\_  
Employer's Signature

**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. If housing is indicated that it is available, it is the participant's responsibility to confirm with their local representative or WISE to ensure that all necessary steps have been taken to secure a room at housing. Signing this document does not secure or reserving housing for the participants.

Participant's Printed Name:  \_\_\_\_\_  
Participant's Signature