

## Independent/Self-Arranged Job Offer J-1 Work and Travel USA Program / Evidence of Support To be completed by Employer and Signed by Employer and Student

This job offer (Name of the s	is for:		
EMPLOYME	•		
		TIN/EIN:	
		www	
Mailing Addres	ss:		
(If different from above)		Office Tel Number:	
		Office Fax Number:	
Job start date (mm/dd/yyyy)://		If flexible, indicate the period:	
Job end date (	mm/dd/yyyy)://	If flexible, indicate the period:	
Minimum pay r	rate/hour:	_ Tips available? ☐ Yes ☐ No	
Hours per wee	k:	Overtime available?   Yes   No Overtime rate/hour:	
BENEFITS	☐ Meals:	End of season bonus:	
Housing:			
If provided:	☐ Student must stay at housing arra	anged	
Housing fee		ue date: Utilities included? ☐ Yes ☐ No	
		ue date: Refundable amount:	
	·		
provide partic agrees to pay "Company" a are any chan their position any emergen agrees the pa agrees the wa	cipants the number of hours of paid y those participants eligible for over grees to notify sponsors promptly water ges or deviations in the job placen ahead of their planned departure. " cy involving participants of any si articipant will receive compensation age offered meets or exceeds federal	rovided on this job offer form is accurate. "Company" agrees to demployment per week as identified on the job offer. "Company" ertime worked in accordance with applicable state or federal law. when participants arrive at the work site to begin work, when there nents during the participants program, or when participants leave "Company" agrees to contact CETUSA immediately in the event of ituation that impacts the welfare of the participants. "Company" equal to that offered to his/her American counterpart. "Company" I and state minimum wage guidelines.	
Company Representative completing this form		Position at Company named above	
Compa	any Representative's Signature		
Business Licer	nse No. or Corporation Filing No. :		
Employer Iden	tification No.:		
Workmen's Co	ompensation Provider:		
Workmen's Co	empensation Policy No.:		

## STUDENT'S STATEMENT OF ACCEPTANCE

I have thoroughly read this employment offer. I understand and meet all qualifications. I accept the position with all the terms and conditions offered and stated herein. I confirm that I can communicate effectively in English and that my English level is sufficient for this position. I clearly understand that I will only have authorization to work for the employer indicated in this agreement while in the U.S. Change of employment is not allowed on program without express written consent by CETUSA. Job change authorization is given only in rare instances when the employer is unable to meet the terms of the job offer agreement after consultation and mediation with CETUSA. Regardless of work status, all financial obligations, including but not limited to housing lease agreements, must be honored and paid in full. Failure to have written consent from CETUSA to change jobs, or failure to meet financial obligations such as housing lease agreements or any financial liability incurred while on program, will result in early termination of my program.

I also understand and agree to the following: I am able and willing to arrive to my place of employment by the job start date indicated in this job offer. Should I choose or be unable to arrive to work on time my job position may be lost. My employer has no obligation to hold the position for me. This could create a financial hardship making it difficult or impossible for me to remain on program. I understand it is my responsibility to be able to support myself financially at all times during my participation on the CETUSA Work and Travel Program regardless of circumstance. I can and will remain working until the job end date indicated in this job offer. Leaving my job early, without expressed written consent from CETUSA may result in an early termination of my participation on program.

My employment with the employer indicated in this job offer is not a guarantee of employment under all circumstances. My employment is dependent upon my contribution, work performance and adherence to company policies. I also understand that my employer can terminate the employment offer at any time without prior notice and for reasons not prohibited by law. My position, duties and responsibilities may vary during the period of employment to be able to satisfy the needs of the employer.

I am only eligible to work in the U.S. during the program dates indicated on my DS-2019 Form.

I have been given sufficient time and guidance to read through the job offer and statement of acceptance and to ask questions, seek and receive clarification. I further declare that I have freely chosen this job opportunity and that I am not signing under any type of pressure or coercion. I have given careful and thorough consideration before signing the statement of acceptance. My signature below indicates that I understand all of the above and agree to all stated terms and conditions.

Student's name:	Please return
Student's name.	G3 UTMS
Student's signature:	Council for Educationa
	100 South Rock Street, Central
Date (mm/dd/yyyy)://	Tel: (360) 736-6472 Fax: (360) 736-6
	Mission Statement:reaching out to en

to:

I Travel USA lia, WA 98531 - USA 525 E-mail: wat@cetusa.org

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