

JANUS INTERNATIONAL HOSPITALITY STUDENT EXCHANGE 16102 Theme Park Way, Doswell, VA 23047 866-249-3888 J-1 Employer Profile and Employer Verification

As the designated Exchange Visitor Program Sponsor, Janus International is responsible for ensuring that the employers for Janus sponsored participants receive the support and information they need, and that they meet certain criteria to help ensure the success of the J-1 Work and Travel Exchange Program. So that we can proceed with issuing/changing the necessary DS-2019 (Certificate of Eligibility for Exchange Visitor Status) to the J-1 participant(s), we need to receive the following form and information by email or fax from the employer additional pages can be added if necessary). Call us at 1-866-249-3888 if you have questions or need assistance.

NAME(S) OF J-1 PARTICIPANTS HIR	ED: 1.		
2		3.	
BUSINESS NAME:		ADDRESS:	
CITY ST	TATE	WEBSITE:	
J-1 MANAGER/CONTACT:		PHONE:	EXT:
EMAIL ADDRESS:			
FEIN (Federal Employer Identification	on Number)		
*Please attach copy of Worker's Co	ompensation Cover Sheet		
WORKMAN'S COMPENSATION PRO	OVIDER & POLICY NUMBER:		
LIST THE JOB(S) AND GENERAL JOB	DESCRIPTION(S) THAT WILL B	E PROVIDED TO PARTICIPANTS:	
JOB START DATE PROVIDED:		JOB END DATE PROVIDED:	
# OF WORK HOURS THAT EACH PAI	RTICIPANT WILL AVERAGE WK	LY:	(Paid Weekly or Bi-Weekly?)
HOURLY PAY RATE/OVERTIME RAT	E: HOUSING	G DEPOSIT REQUIRED (AMT?)	HOUSING RATE:
PLEASE DESCRIBE PARTICIPANT HO	USING AND TRANSPORTATION	N ARRANGEMENTS:	
ADDRESS:			
employers and J-1 participants to u	utilize any cultural exchange o vities available that contribute	pportunities in their area. Please	his objective by encouraging and supporting list any local events, places of interest to visit, ant of experiencing what life is like in the U.S.,
	ts all building, safety and odes of participant's location or e	ccupancy codes) at the agreed-umployment.	access to cultural activities, to arrange and/or upon rate, and to advise Janus International occupational safety.
Employer agrees to provide each for after their arrival in the United	J-1 Work and Travel Participa States, including a telephone of ork and Travel students ar	ant with a Job Agreement, outlini contact and an email address for e considered non-resident alie	ing the terms of employment and instructions their inquiries prior to arrival. ns who are not subject to Social Security
Employer Name		Title Employer	Signature Date
J1 Participant Printed Name		J1 Participant Signature (Accepting the information	Date outlined above)

RETURN THIS FORM BY FAX TO 804 876 3113 OR EMAIL

 $to \underline{\ vmoher@janus-International.com}\ or\ \underline{\ student@janus-international.com}$

Include copy of any Employment, Housing or other Agreements signed by J-1 Participant(s)