



# CCI Greenheart Work & Travel Program: Self-Arranged Job Offer

All participants finding their own job must complete this job offer, including required signatures, and return the first page to CCI Greenheart. If completed by the employer, this form should be sent directly to the participant. ALL participant jobs must be confirmed by CCI Greenheart PRIOR to starting work.

EMPLOYER INFORMATION				
Name of Company		Tax ID / FEIN#	Workers Comp Policy #	
Website		Workers Comp Carrier	Workers Comp Expiration Date	
Primary Business Address			Worksite Address, if different from Primary Address (no PO Boxes!)	
City	State	Zip	City	State Zip
Name of person extending this job offer			Name of supervisor assigned to participant	
Title	Email	Title	Email	
Telephone (MUST be worksite #)	Mobile/Off-season Phone	Business Fax	Total # of Employees	# of International Staff
Company Activities				

JOB DESCRIPTION			
Job Title	Job is valid FROM	Job is valid TO	
Description of general job duties	Identify any uniforms, safety equipment, etc., participant must provide:		
Estimated # of hours/week (min 32 average)	Number of days / week	Est. cost of uniforms, equipment, etc.	Any vacation benefits (paid or otherwise)
Hourly wage	Pay frequency	Overtime availability	Overtime wage

YES, I PROVIDE HOUSING (EMPLOYER) (it is best practice for employers who do not provide housing to assist with housing & transportation leads.)			
Notice: housing must be safe, reliable, convenient, and in accordance with all local laws/ordinances			
Deposit Required? Yes No	Deposit Amount	Housing cost / month	Are costs deducted from paycheck?
# of bedrooms	# of tenants per room	total # of tenants in unit	
Distance from housing to job site	Is transportation available? Yes No	Utilities included in rent	Utilities NOT included in rent
Kind of transportation from housing to job	COST of transportation from housing to job		Utilities COST, in not included in rent

EMPLOYER AGREEMENT	
<p>The CCI Greenheart (CCI-GH herein) is a U.S. Department of State Designated Work and Travel Program sponsor. This document serves as an employment agreement between the business and the WT participant named on the CCI-GH job offer. This agreement is not valid until CCI-GH has fully screened, vetted, and approved the organization named in the CCI-GH job offer. For purposes of this agreement, "WT participant" refers to the foreign participant entering the U.S. temporarily, under CCI-GH's J-1 Summer Work Travel visa sponsorship. Continued sponsorship and cooperation is contingent upon adherence to all CCI-GH program rules and U.S. Department of State Summer Work Travel regulations (22 C.F.R. Part 62). CCI-GH cannot be held responsible for the actions of participants under CCI-GH sponsorship, including employment performance and workplace suitability, nor any liabilities created, assumed, or incurred by the participants. By signing this agreement, and as an authorized representative of my business, I agree to the Employer Placement/Housing terms of agreement found here: <a href="http://www.cci-exchange.com/SWT-emp-terms-100413/">http://www.cci-exchange.com/SWT-emp-terms-100413/</a></p>	
Business Representative's Name (Please print):	TITLE:
Business Representative's Signature:	DATE:

PARTICIPANT AGREEMENT		
<p>By signing this agreement, I hereby confirm that I have read and agree to all terms of the PARTICIPANT TERMS AND CONDITIONS submitted with my application. I agree to the Participant Placement/Housing terms of agreement found here: <a href="http://www.cci-exchange.com/SWT-pax-terms-100413/">http://www.cci-exchange.com/SWT-pax-terms-100413/</a></p>		
FIRST NAME (Please print):	LAST NAME:	CCI ID#:
Participant's signature of acceptance:	DATE:	

If your Employer does NOT provide housing
<p>If your employer does not provide housing for you, you are required to explain your plan for finding suitable housing. What is your housing address in the USA? If not known, please explain your plan to find housing here. Be specific!</p>