

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 PARTICIPANT	S HIRED:				
BUSINESS NAME:	SINESS NAME:STREET ADDRESS:				
CITY/STATE	J-1 MANAGER/	/CONTACT:	W	EBSITE:	
PHONE:	EXT:	EMAIL ADDRESS:			
FEIN (Federal Employer Identifica	ation Number) #				
WORKMAN'S COMPENSATION	N PROVIDER & POLIC	CY NUMBER:		_	
LIST THE JOB(S) AND GENERA	AL JOB DESCRIPTION	(S) THAT WILL BE PROVIDE.	D TO PARTICI	PANTS:	
JOB START DATE PROVIDED:		JOB END DATE PROVIDE	ED:		
# OF WORK HOURS THAT EACH	CH PARTICIPANT WII	LL AVERAGE WKLY:	_ (Paid Weekly	or Bi-Weekly?)	
HOURLY PAY RATE/OVERTIM	E RATE:F	HOUSING DEPOSIT REQUIRE	D (AMT?)	HOUSING RATE:	
PLEASE DESCRIBE PARTICIPA	NT HOUSING AND T	RANSPORTATION ARRANGE	EMENTS:		
HOUSING ADDRESS:					
A primary objective of the J-1 Wo employers and J-1 participants to uvisit, work related or pre-organized in the U.S., and their understanding	tilize any cultural exchar l activities available that	nge opportunities in their area. F	Please list any lo	cal events, places of interest to	
Employer agrees to provide employer agrees to provide acceptable housing (meets immediately of any change in statuEmployer complies with all FedeEmployer agrees to provide each instructions for after their arrival irEmployer is aware that J-1 Work Medicare, or Federal Unemployment	all building, safety and of soft participant's location ral, State and local laws J-1 Work and Travel Part the United States, incluand Travel students are	occupancy codes) at the agreed-upon or employment. regarding employment, labor law rticipant with a Job Agreement, adding a telephone contact and an acconsidered non-resident aliens we	upon rate, and to we and occupation outlining the ter email address fo	advise Janus International onal safety. This of employment and or their inquiries prior to arrival.	
Employer Name and Title		Employer Signature		Date	
J1 Participant Printed Name		ipant Signature (Accepting the	e information	outlined above) Date	

RETURN THIS FORM BY FAX TO 804 876 3113 OR EMAIL TO wmoher@janus-International.com or student@janus-international.com or student@janus-international.com or