

EMPLOYER APPLICATION AND AGREEMENT J1 Work & Travel Program

Thank you for your interest in the J-1 visa Summer Work and Travel Exchange Visitor Program. American Exchange Organization is a Department of State Designated Sponsor and is authorized to review and approve employers to participate in the program based on information collected in this form.

While we appreciate that hiring J-1 visa Participants will meet your seasonal or temporary staffing needs, the main purpose of this program is to give young people from around the world the opportunity to visit the United States and experience American culture so that they may return to their countries having built relationships with Americans and improved their English, and shared their culture with those they met in the USA. This is a foreign diplomacy program.

Please read all information carefully and answer all questions completely. Your signature and initials may be required on multiple pages and in multiple locations.

I. Host Employer Cooperation as stated the Department of State Regulations (22 CFR Part 62)

- "(o) Host employer cooperation. Sponsors may place participants only with host employers that agree to:
- (1) Make good faith efforts to provide participants the number of hours of paid employment per week as identified on their job offers and agreed to when the sponsors vetted the jobs;
- (2) Pay eligible participants for overtime worked in accordance with applicable State or Federal law;
- (3) Notify sponsors promptly when participants arrive at the work sites to begin their programs; when there are any changes or deviations in the job placements during the participants' programs; when participants are not meeting the requirements of their job placements; or when participants leave their positions ahead of their planned departures;
- (4) Contact sponsors immediately in the event of any emergency involving participants or any situations that impact their health, safety, or welfare; and
- (5) In those instances when the employer provides housing or transportation, agree to provide suitable and acceptable accommodations and/or reliable, affordable, and convenient transportation. "
 - Ø My company agrees in good faith to abide by the above mentioned regulations. _____ (initial)

II. Important rules that Participants Must Follow. Failure to abide by these rules may result in immediate termination of the Participant's visa. Employers should remind Participants of these rules.

- 1. Participants must contact AmerEx within 10 days of arriving to the USA.
- 2. Participants must validate their program in AXIS within 10 days of the start date on the DS-2019.
- Participants are ONLY allowed to work from the start date to the end date indicated on the DS-2019.
- 4. Participants are NOT allowed to switch jobs or leave employment without written consent from AmerEx.
- Participants are NOT allowed to start a second job without written approval from AmerEx.
- 6. Participants must notify AmerEx in AXIS within 10 days of changing housing address.
- 7. Participants (or employers) must notify AmerEx if the worksite address changes.
- 8. Participants must complete Monthly Contact Outreach Surveys. Failure to respond to 2 consecutive outreaches will result in program termination.
 - Ø My company agrees in good faith to encourage Participants to abide by the above mentioned rules. _____ (initial)

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I confirm that the positions listed will be allocated for AmerEx participants and such participants recruited and selected by AmerEx will be extended employment with our company for the duration of their program under the conditions indicated and that I have the authority to make hiring decisions at this company. I understand the conditions of the program and explicitly agree to the following:

him/her to work in the U.S. legally for the period indicated on the participants must return to their home country (initial)	heir DS-2019 form and that after completion of the program
(2) Our company wishes to participate in SWT program as an Er sponsor or a U.S. consulate to vet each job offer and cooperate (initial)	
(3) Our company will employ each participant under the terms to those provided to American counterpart, and in compliance pertinent minimum wage and overtime regulations (init	
(4) If housing is provided by our company, we certify that the prefederal and state laws (initial)	remises are safe, affordable and in compliance with pertinent
(5) Participants must apply for the J-1 visa at the U.S. consulate be approved; (initial)	in his/her home country and there is no guarantee the visa will
 (6) Per U.S. Department of State, AmerEx must know where each AmerEx in all efforts to monitor each participant by (a) Encouraging each participant to follow all AmerEx at (b) Contacting the sponsor when the participant arrives (c) Notifying the sponsor of any concerns about, change (d) Notifying the sponsor if participant leaves his/her er 24 hours of disappearance of any participant during the (e) In case of ANY emergency involving the Participant 	nd Department of State rules and regulations sor does not arrive on-time, es in or deviations from the job/housing offer mployment or housing ahead of the program end date or within e program
(7) In case of pending termination of a participant from our empopertunity for the sponsor to resolve any misunderstanding of (initial)	
(8) Our company agrees that it shall not, without the written co of its obligations herein (initial)	onsent of the sponsor, assign or subcontract to third parties any
	nin the jurisdiction of the executive, legislative, or judicial branch y falsifies, conceals, or covers up by any trick, scheme, or device ent statement or representation; or makes or uses any false lly false, fictitious, or fraudulent statement or entry; shall be
Employer Signature	Date
Printed Name:	



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For your convenience this form allows you to type your answers. This form MUST be completed digitally, then printed and signed. We ask that you scan the signed form and return to AmerEx at employers@amerex.org or via fax. Photographs and handwritten applications will not be accepted.

EMPLOYER INFORM	MPLOYER INFORMATION Tax ID/EIN:		ID/EIN:	Years in Business:				
Registered Company Nam	ne:					Bus.To	elephone:	
DBA Name:				Business De	scription:			
Company Name on Paych	necks:					Website:		
Mailing Address:					City:		State:	ZIP:
Worksite Address:					City:		State:	ZIP:
Main Office Address:					City:		State:	ZIP:
The following contact info season. All employees sh completely fill out the follo	nould b	e famili	ar with	the program part	icipants and the	e rules of the pr	ogram <u>includi</u>	ng <u>the owners.</u> Pleas
Contact Person's First/Last	Name:				Supervisor Firs	t/Last Name:		
Bus. Email:			Bus. Email:					
Title:			Title:					
Direct/Mobile #:			Direct/Mobile #:					
Owner First & Last Name:			Have you worked with a SWT program before?					
Bus. Email:			Have you worked with AmerEx before?					
Direct/Mobile #:				Number of Employees:Number of Branches:				
Participants will work along The J-1 participants hired My company currently has Planned Cultural Activities: I understand a social security card is NOT required to begin work.	gside U. will not d	S. Citizedisplaces on loc	ens. U.S. wo	Agree Disagorkers.	My company Hours will no Participants v	experienced layor to be predominate will not be concerned they YES drive in YES	oly from 10 pm antrated in one lo	Agree Disagree 120 days. And 6 am.
POSITION DETAILS Position Title	¢/hr	# Joho	¢/hr OT	Doo	orintion	Poquiron	onto (English Is	avol gondor skills etc.)
Fusition Title	\$/hr	# JODS	\$/hr OT	Des	cription	Kequiren	iento (English le	evel,gender,skills etc.)
	1	<u> </u>	<u> </u>					
			<u> </u>					
State Min. Wage:	\$/br 4	 merica	ns make	in: Position 1:	2:	3:	Pay Cycle:	
Earliest start date:	_ Ψ/111 Γ		start dat		Earliest end da		Latest end	
	ote- Par		s outsic	e:le of the earliest s	_			-



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POSITION DETAILS CONTINUED:							
Hrs/week Min (32 Required): Max:	Overtime Required?	Overtime Available?					
All participants need to start and end on the same day? Training provided? Uniform Cost to Employees:							
Grooming Requirements/ Dress Code	Employer Training Details: (Paid/unpaid, cost,duration)						
Describe all other employee benefits (tips,bonuses, discounts etc.):							
HOUSING DETAILS	Will suggest housing?						
Provided Housing	Suggested Housing:						
Complex Name: Address:	<u> </u>						
City: State: Zip	Housing Type:						
Rent: Per: Deposit:	Complex Name:						
# Bedrooms: People/room: # Bathroom	Address:						
Rent Deducted from pay?: Specific utilities	City:						
Specific utilities not included: Estimated cos	State: Zip:						
Miles to work site: Safe neighborhood? Safe	e at night? Safe to walk?	Safe neighborhood?					
Safe to bike? Deposit Return Policy:		Miles to worksite :					
This housing includes: Bed frame w/ mattress Mattress only Air mattre	ess Pull-out Couch A/C	Public Transportation?:					
Microwave Oven Cutlery Pots/Pans Dis	Contact Name:						
Table Chairs Linens Other:		Contact Info:					
I understand the participant may refuse the provided house	sing I understand if deduc	cted from pay I cannot profit from housing:					
Transportation Arrival Pick up?	Pick up contact name:	Contact phone:					
Arrival airport/station:							
City: State: Zip:	Instructions:						
Cost per person:							
Transportation to/from work available? Type: Cost/day: Details:							
Transportation to/from SS Office? Type:	Cost/day: Details	s:					
eekend transportation available? Type: Cost/day: Details:							
Public transportation available? Type:	Cost/day:Details	s:					
Public transportation pass available? Is it safe to walk?Minutes walking:							
Is it safe to bike? I understand that participants should no be biking on highways or dangerous/ busy roads							
EMPLOYER SIGNATURE							
Employer First/Last Name:	articipant's Name:						
	Date:	Date:					
Signature	st day of work:						
Direct Supervisor First/Last Name:	ast day of work:						
	 Date:						
Signature		Signature					