

# Work and Travel Job Offer



This form is provided as an important part of the application process to confirm the agreement between the participant and the work site.

Please complete all of the below information, sign, scan and attach to return to USSE.

## Employer Information

Company Name:

Tax ID# (EIN):

Street Address: (No  
PO Boxes)

City:

State:

Zip  
Code:

Supervisor/Manager:

Title:

Phone Number:

Fax Number:

E-mail:

Website:

Business Type:

Does your company maintain the required workers  
compensation insurance?

Yes      No

Provider  
Name:

Policy Number:

Expiration  
Date:

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## Participant Information

Last (Sur) Name:

First Name:

Participant Nickname:

E-mail:

Street Address:

City:

Province/State:

Country:

Postal Code:

Current Phone  
Number:

U.S. Phone  
Number:

Sending Partner  
Company Name:

## Job Description

Job Title:

Dates of Employment:                      From                                            To                     

Earliest Start Date:                                            Latest Start Date:                     

Earliest End Date:                                            Latest End Date:                     

Description of  
Position and Duties:

Required Skills:

English Level  
Required:

Hourly  
Wage:

Tips:

Average Hours per  
Week:

Overtime  
Available:

Is overtime paid at  
a higher rate?

Length of Training:

Average Hours  
during Training:

Is training  
paid?

First paycheck is received after how  
many weeks on the schedule:

Frequency of  
Paycheck:

Is a drug screen  
required?

Are union dues deducted from paycheck?

Amount deducted?

Frequency?

How will employee receive final paycheck (i.e. while in the US, mailed to home country, etc.)?

## Work Location Information

USSE must know the participants exact work location at all times. If there are multiple work locations, please indicate which is the primary work location.

Work Locations (names of business, complete address, phone number):

Name of organization issuing paychecks to participants:

## **Social Security Information**

Under what  
circumstance will the  
paycheck be issued?

No Social Security receipt or card needed

Participant must have applied for Social Security card and is able to provide  
receipt verifying application

Participant must provide Social Security card

Where is the closest  
Social Security office?

Is Social Security application  
assistance provided?

If yes, please provide details on the type of assistance  
(transportation to SS office, SS at work site, etc.):

## **Uniform and Grooming Standards**

Uniform Required:

Uniform Costs:

Uniform Details and  
Grooming Standards:

## **Cultural Exchange Information**

Please describe the cultural exchange activities and events that you will facilitate for the participants (trips, events, company sponsored activities, etc.):

Do you need USSE's assistance in planning cultural exchange activities?

*Please send any publicity and/or information about your cultural exchange activities so that we may help notify the participants and encourage attendance.*

## Housing Information

Is housing provided?

Are participants obligated to live in housing provided upon arrival?

Is the participant required to sign a housing agreement?

Address of Housing:

Property Manager Name:

Phone Number:

Type of Housing:

Number of Bedrooms:

Maximum Number of Participants per Bedroom:

Cost of Housing per Week:

Utilities Included:

Estimated weekly cost of utilities:

How will participant pay rent?

Frequency of Rent Payment:

Is any part of the rent required to be paid pre-arrival?

What is the due date for the pre-arrival rent payment?

Cost of Pre-arrival Rent:

Is a housing deposit required?

When is the housing deposit due?

Housing Deposit Amount per Student:

Is the housing deposit refundable?

Who is responsible for the refund?

When is the deposit refunded?

How will housing deposits and/or any pre-paid rent be refunded should the participant withdraws from the program prior to arrival or if they are denied at the US Consulate?

Indicate the housing amenities available at this site:

Co-Ed	Cable/Satellite TV
Telephone	Free Wi-Fi or Internet
Computer	Heating/Air Conditioning
Cooking Facilities	Refrigerator
Microwave	Stove/Oven
Dishwasher	Kitchen Utensils/Pots & Pans
Dining Table/Chairs	Living Room Furniture
Laundry Facilities	Single Bed
Double Bed	Bunk Bed
Air Mattress	Bed Linens (sheets, pillows, blankets)
Towels	
Other	

Distance from Housing to Work Site:

Distance from Housing to Grocery Store:

*Include pictures of any housing options available. Attach available housing agreements.*

## Transportation Information

Nearest Airport:

Nearest Bus Station:

Will the employer provide transportation from the airport/bus station?

Details of employer-sponsored transportation upon arrival:

Method of transportation from housing to work site:

Cost of Transportation and Details:

## Meal Information

Do the participants receive any meal benefits?

Are participants required to purchase the meal plan?

Full Meal Plan Cost per Day:

Lunch Plan Cost per Day:

Breakfast Plan Cost per Day:

Dinner Plan Cost per Day:

Describe any other meal benefits available to participants:

## Additional Information

Provide any additional details that would help a participant to have a realistic expectation of the job and their living arrangements.

### Note to Employer:

Should any aspect of the site information change, you should inform USSE accordingly. You should provide participants with any documents you feel are necessary prior to their arrival. Regulations governing the Summer Work Travel exchange program requires that sponsors shall advise program participants regarding Federal Minimum Wage requirements and shall ensure that the participants receive pay and benefits commensurate with those offered their American counterparts [22 CFR 62.32 (e)]. By completing and signing this form you are agreeing to hire the above international student on a temporary basis for the duration of time indicated above. The above-named student is participating in the USSE Summer Work and Travel Program. All information provided must be complete and accurate, providing false information is a violation of the Department of State Exchange Visitor Program regulations. By completing and signing this form, you certify that you are in compliance with the Fair Labor Standards Act and that the pay and benefits are commensurate with those offered American counterparts.

Employer's Printed  
Name:

Date of  
Agreement:

Employer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Participant agreement to terms of employment:

I accept to the above job offer and the terms of employment. I understand that the conditions of my employment may change based on the needs of my employer and any other unavoidable circumstances. If housing is indicated that it is available, it is my responsibility to confirm with my local representative or USSE to ensure that all necessary steps have been taken to secure a room within the provided housing. Signing this document does not secure or reserve housing for me.

Participant's  
Printed Name:

Date of  
Agreement:

Participant Signature: \_\_\_\_\_

Date: \_\_\_\_\_