

Work & Travel USA

Employment Offer Agreement Form Spring/Summer 2006

Employer Section

Company Name		Website	
Street			
City		State	Zip
Phone		Fax	TaxID
Off season contact phone number (Nov-May)		How many international students do you intend to hire?	

Offer made to Please fill out one application per student.

Student Name	
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Job Information

Worksite address (if different from above) Street		
City	State Zip Telephone	
Dates of employment: from <small>Day Month Year</small> to <small>Day Month Year</small> <i>Maximum of four (4) months</i>		
Manager's name	Manager's phone	
Manager's e-mail		
Job title	Job description	
Wage per hour	Average number of hours per week	
Is an end of season bonus available? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much	
Does employer provide housing? <input type="checkbox"/> Yes <input type="checkbox"/> No	Cost of housing	
Housing deposit	Type of accommodation (house/hotel/etc)	
How many people share room?	How many people share house?	Is housing furnished?

The student named above has been offered a temporary position with the company by an authorized company representative and the salary and other terms are commensurate with those of his/her US counterparts.

Name of person completing this form	Title <small>Day Month Year</small>
Signature	Date
Are you an employee of the company listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If no, please complete: Company name	Telephone
Are you an <input type="checkbox"/> Employment agency <input type="checkbox"/> Staffing company <input type="checkbox"/> Other:	

Work & Travel Participant Section

By signing below, I indicate my understanding and agreement with the following terms:

1. Any position offered to me is not a firm, irrevocable offer and may be revoked at any time before I commence employment. In the event that the employer revokes this offer, CIEE will assist me in my effort to find alternative employment, but CIEE makes no guarantee that its effort will be successful. I will be an employee-at-will, and my employment relationship may be terminated at any time by the employer.
2. I understand that it is my responsibility to consult the full Employer Profile for additional information on any CIEE-sourced job. The terms above are general in nature and my hours and duties are subject to change. I will report to the employer listed above within five days of arrival in the United States. I will work for a period that will not exceed the end date on my DS-2019 form. If I wish to change employers, I must receive permission from both CIEE and my CIEE Partner prior to doing so.
3. I will adhere to all CIEE and CIEE Partner rules regarding employment and program participation, including the Terms and Conditions / Participant Declaration which forms part of my program application. Should I change jobs without receiving prior permission from CIEE and my CIEE Partner, or if I violate other CIEE or CIEE Partner rules, CIEE may terminate its sponsorship of me and I will be required to return home. I also understand that such termination may prevent me from receiving future US visas.

Name	ATLAS ID
Signature	Date <small>Day Month Year</small>
How did you find your job? <input type="checkbox"/> CIEE Agency <input type="checkbox"/> Employment Agency <input type="checkbox"/> Directly with employer <input type="checkbox"/> Internet <input type="checkbox"/> Other:	

THE PARTICIPANT MUST SEND THE ORIGINAL SIGNED AGREEMENT TO HIS/HER CIEE PARTNER.

THE PARTICIPANT MUST ALSO SEND A COPY TO THE EMPLOYER AND KEEP A COPY FOR HIS/HER OWN RECORDS.