



CULTURAL HOMESTAY INTERNATIONAL

104 BUTTERFIELD ROAD, SAN ANSELMO, CA 94960-1565, USA
Tel.: (800) 432-4643 / Fax: (415) 459-2182 / Email: chiwt@chinnet.org

WORK & TRAVEL JOB OFFER

PARTICIPANT INFORMATION

PARTICIPANT'S NAME _____ COUNTRY OF RESIDENCE _____ [] MALE [] FEMALE

COMPANY INFORMATION

COMPANY'S NAME _____ COMPANY DBA (DOING BUSINESS AS) _____ SUPERVISOR/MANAGER _____

COMPANY ADDRESS (MAILING) _____ CITY _____ STATE _____ ZIP CODE _____

WORK SITE ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____ FAX NUMBER _____ WEB SITE _____ EMAIL ADDRESS _____

Tax ID# (EIN): _____ WORKERS' COMP POLICY # _____ WORKERS' COMP POLICY DATES _____

WORKERS' COMP INSURANCE COMPANY NAME _____

*** Copy of BUSINESS LICENSE and WORKERS' COMP POLICY sent to CHI ***

JOB DESCRIPTION

JOB TITLE: _____ DATES OF EMPLOYMENT: START DATE: _____ END DATE: _____

DESCRIPTION OF POSITION _____

WAGE PER HOUR: \$ _____ AVERAGE NUMBER OF HOURS PER WEEK: _____ Tips: _____ (Yes / No)

HOUSING

DOES THE EMPLOYER PROVIDE HOUSING? _____ COST OF HOUSING \$ _____ [] WEEKLY [] MONTHLY # OF OCCUPANTS _____

DEPOSIT AMOUNT \$ _____ DEPOSIT DUE DATE _____ TYPE OF HOUSING [] DORMITORY [] APT-NT [] MOTEL/HOTEL

HOUSING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

HOW FAR IS THE HOUSING LOCATION TO THE WORK PLACE? _____

DESCRIBE NEIGHBORHOOD (i.e. URBAN, CITY, SUBURB, TOURIST/RESORT, etc.) _____

LIST OF ALL INCIDENTALS/AMENITIES PARTICIPANT(S) WILL BE RESPONSIBLE FOR PAYING IN ADDITION TO RENT (i.e. utilities, linens, kitchen utensils, cable etc.): _____

*** Photos of housing must be sent to CHI ***
Exterior of house, bedroom to be rented, bathroom to be used by participant, kitchen facilities

TRANSPORTATION

HOW WILL THE PARTICIPANT GET TO AND FROM THE WORK SITE? _____

WHAT IS THE AVERAGE COST OF TRANSPORTATION? _____

LIST THE PRIMARY MEANS OF TRANSPORTATION AVAILABLE IN THE AREA _____

IS TRANSPORTATION FROM THE AIRPORT/BUS STATION TO EMPLOYER PROVIDED? _____

NEAREST INTERNATIONAL AIRPORT _____ NEAREST BUS STATION _____

SOCIAL SECURITY

IS SOCIAL SECURITY REQUIRED TO BEGIN WORK? DETAILS: _____

WHERE IS THE CLOSEST SOCIAL SECURITY OFFICE? _____ DISTANCE FROM WORK SITE _____

DISCLOSURE OF JOB RELATED & NON-JOB RELATED DEDUCTIONS (Please use a separate sheet of paper if necessary)

THE FOLLOWING EXPENSES ARE JOB RELATED AND WILL BE CONSIDERED AS A DEDUCTION: _____

LIST ANY DEDUCTION(S) THAT ARE EQUAL TO SIMILARLY SITUATED AMERICAN COUNTERPARTS: _____

LIST ANY EXPENSES THAT ARE NOT JOB RELATED AND WILL BE CONSIDERED AS A DEDUCTION: _____



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CULTURAL COMPONENT

The U.S. Department of State issued a directive which focuses on participants balancing the work experience with the opportunities of interacting with Americans and learning about American society and values.

Work & Travel participants are required to complete a cultural component outside of work. Cultural activities include visits to national parks and museums, interaction with Americans, barbecue, attendance at a sporting event, and more.

CHI needs to ensure the participant receives credit for a cultural activity by documenting their attendance
CHI would like to ask for your assistance with participants' activities. Please submit all participant activities

to CHI by emailing or by faxing to the following contacts: email: chiwt@chinet.org Tel: 415-459-2182

PROGRAM TERMS AND CONDITIONS

EMPLOYER

1. The Employer is responsible to have sufficient resources, planning, equipment and trained personnel to provide a bona fide Work & Travel experience including:
 - The job is seasonal and temporary**
 - Participants will not displace U.S. workers**
 - Employer has not experienced layoffs within the past 120 days**
 - Employer does not have workers on lock out or on strike**
 - The position will be non-isolating and allow for routine interaction with Americans**
2. The Employer confirms that they are not involved in a goods-producing industry or in agriculture, forestry, fishing or hunting, mining, construction, food manufacturing, beverage and tobacco product manufacturing, textile mills, apparel manufacturing, leather product manufacturing, wood, paper, petroleum, coal, chemical, plastics or rubber manufacturing.
(For complete NAICS list of industry sectors (11, 21, 23, 31-33) refer to: www.bls.gov/iag/tgs/iag06.htm#about)
3. The Employer agrees to provide an introductory orientation to the company upon the individual WT Participant's arrival to the workplace.
4. In situations where the Employer provides housing or transportation, the Employer agrees to provide suitable and acceptable accommodations and/or reliable, affordable and convenient transportation.
5. The Employer agrees to notify CHI immediately of any changes in the job offer conditions or if any WT participants leave or are terminated from their position, and to contact CHI immediately in the event of any emergency involving WT participants.
6. The Employer understands all CHI WT participants must be paid at least the state and federal minimum wage, but not less than what is customary of the Employer's American workers holding the same job. Further, the Employer agrees to pay those participants eligible for overtime worked in accordance with applicable state or federal law and to seek advance permission from the participant for any non-tax payroll deductions or changes to deductions.
7. The Employer understands that CHI, its Foreign Agents abroad, and the participants attempt to provide correct arrival dates, but visa issuance, flights and school schedules may cause changes in actual arrival information.
8. The Employer understands that all Work & Travel participants under J-1 visas are:
 - Not subject to Social Security (FICA), Medicare or Federal Unemployment (FUTA) withholding taxes.
 - Not subject to Non-exempt from Federal, State and Local taxes.
9. The Employer understands that all USA Work & Travel participants under J-1 visas must apply for a Social Security number; however, The DS 2019 and I-94 card together will provide proof of authorization to work until they receive their number. See www.ssa.gov/employer/hiring

As a matter of compliance with the Department of State program regulations, the Employer understands and agrees to:

NOT engage in, permit the use of, or otherwise cooperate or contract with staffing/employment agencies or subcontractors for the purpose of recruiting or outsourcing any core program functions (i.e. screening, selection and orientation of program participants).

NOT to receive incentives from agencies to accept program participants for job placements.

NOT to facilitate any participants with invalid job offers or DS-2019 forms in making visa or travel arrangements.

NOT to engage in or facilitate fraudulent placements, submission of fraudulent job offers or activities.

Provide CHI a copy of a proof of business licensing and/or registration to enable it to conduct business in the venue(s) where it operates.



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EMPLOYER AGREEMENT

Employers are obligated to immediately report to CHI any situation that compromises the health, safety and welfare of the participant. Should any aspect of the job offer change, you should inform CHI immediately.

As the employer, you are obligated to guide participants toward all CHI preparatory materials and documents sent to you, and the participants, prior to participant's arrival. Regulations governing the Summer Work & Travel program require 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 to their American counterparts.

By completing and signing this form, as the employer, I agree to hire the international participant named-below on a basis for the duration of time indicated on this form.

I understand the international participant is sponsored under the CHI Work & Travel seasonal/temporary program which is governed by the U.S. Department of State regulations.

I acknowledge that all information submitted is complete and accurate; and any false information is a violation of the Department of State Exchange Visitor Program's regulations.

EMPLOYER'S PRINTED NAME

EMPLOYER'S SIGNATURE

DATE

PARTICIPANT AGREEMENT TO TERMS OF EMPLOYMENT

I understand and fully agree to the terms of employment as outlined in this job offer document.

I have reviewed all information related to the positions provided to me by the employer.

I further understand that the conditions of my needs of my employment may change based on the employer and any other unavoidable circumstances.

I will adhere to all CHI Work & Travel program rules regarding employment and program participation, including the Participant Agreement sections of my program application participation, including the Terms and Conditions Participant Agreement sections of my program application.

Violation of any CHI or Department of State rules and regulations may result in review of my program status by CHI, and I might be required to return home.

PARTICIPANT'S PRINTED NAME

PARTICIPANT'S SIGNATURE

DATE