WORK & TRAVEL USA

Employment Offer and Agreement

EMPLOYER SECTION: (TO BE COMPLETED BY BUSINESS OWNER OR AUTHORIZED REPRESENTATIVE)

| Position Offered To : | | | | from | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------|----------------------------|---------------------------------------------------------------|--|--|--|
| | FIRST NAME | MIDDLE NAME | FAMILY NAME | | STUDENT'S COUNTRY | | | |
| Legal Business Name: | | | | | | | | |
| Doing Business As: | | | | | | | | |
| Corporate/Main Address: | | | | | | | | |
| | STREET | | | I | | | | |
| | CITY | | | STATE | ZIP | | | |
| Employment Location: | | | | | | | | |
| | ADDRESS WHERE STUDENT | WILL WORK, IF DIFFERENT FROM | ABOVE | | | | | |
| Turne of During out | CITY | | \A/_ :+ | STATE | ZIP | | | |
| Type of Business: | | | Website: | | | | | |
| Federal Tax ID#: | | Worker's Comp Policy: | POLICY NUMBER (IF REQUIRE | D BY STATE LAW) CARRIER | | | | |
| Employment Contact: | | | Business Owner: | STATELAW) CARRIER | | | | |
| Employment contact. | | | | | | | | |
| NAME | | | NAME | | | | | |
| TITLE | TLE | | | TITLE | | | | |
| PHONE | | | | PHONE | | | | |
| PHONE | | | FIGNE | | | | | |
| MOBILE | | | MOBILE | | | | | |
| EMAIL | | | EMAIL | | | | | |
| Student Position: | | | Yes No | | | | | |
| | JOB TITLE | | WAGE PER HOUR TIPPED P | OSITION? START DATE (MMDD) | (YY) END DATE (MMDDYYY) | | | |
| Average number of work hours per week: | | | Are overtime hours available? | | | | | |
| Total # of international students hired at this location: | | | Total # of All Employees: | | | | | |
| Total # of international students from InterExchange: Total # hired from other sources: | | | | | | | | |
| Which other sponsor companies are you using to provide seasonal help? | | | | | | | | |
| | | | | | | | | |
| What level of English is required for this position? 🗌 Beginner 📄 Conversational 📄 Fluent | | | | | | | | |
| | | | | | | | | |
| Please describe job duties: | | | | | | | | |
| Please describe any deductions from student paycheck: | | | | | | | | |
| | | | | | | | | |
| Is housing provided ? | □Yes □No | Deposit Amount: | | Cost: \$ | Per 🗌 Week 🗌 Month | | | |
| (DURATION) Approximate # of Students per Room and description of housing: | | | | | | | | |
| Is transportation available | ? 🗌 Yes 🗌 No | Distance from job locat | ion: | | | | | |
| What opportunities will the participant have to experience American culture while in your employ? | | | | | | | | |
| | | | | | | | | |
| IMPORTANT: An InterExchange representative will contact the employer at the place of business to verify employment offer and the information on this agreement. Without confirmation of this offer and agreement, InterExchange will be unable to provide sponsorship to the prospective employee. | | | | | | | | |
| InterExchange, Inc is a design | _ | - | | | rt 62) Participant sponsorshir | | | |
| is not granted until this Emp sponsorship is contingent upo be advised that as per U.S. De | loyment Offer and Agre on the successful executi | ement has been received, r on of and adherence to this a | eviewed and approved by agreement between the em | an authorized InterExchan | ge representative. Continuec onal exchange student. Please | | | |

EMPLOYER AND EMPLOYEE SECTION ON NEXT PAGE: Employer and employee must read and sign Page Two

EMPLOYER SECTION: (CONTINUED. TO BE COMPLETED BY EMPLOYER)

The undersigned Employer agrees to the following terms and conditions:

I agree to adhere to the goals, objectives, government regulations and sponsor guidelines of the J-1 Summer Work Travel Exchange Visitor Program (22C.F.R. Part 62).

By completing and signing this agreement I affirm that the student named above has been offered temporary employment with the business named herein and that terms stated in this Offer and Agreement are true to the best of my knowledge.

I certify and attest that I am authorized to extend this employment offer to the student on behalf of the company stated herein.

I affirm that my company is none of the following: a staffing or employment agency, home-based, adult entertainment, travelling fair, itinerant concessionaire, chemical pest control, a warehouse, a catalogue/online order distribution center, pedicab, rolling chair or door-to-door sales enterprise; and further, agree that the position does not engage the student in childcare, health/clinical care or domestic services of any kind, require a driver's licenses, require work hours that fall predominantly between 10:00 pm and 6:00 am, is not declared hazardous to youth by the Secretary of Labor at Subpart E of 29 CFR part 570, require sustained physical contact with other people and/or adherence to the Centers for Disease Control and Prevention's Universal Blood and Body Fluid Precautions guidelines (e.g., body piercing, tattooing, massage, manicure), is not involved in gaming and gambling that include direct participation in wagering and/or betting, is not in the North American Industry Classification System's (NAICS) Goods-Producing Industries occupational categories industry sectors 11, 21, 23, 31-33 numbers (set forth at http://www.bls.gov/iag/tgs/iag_index_naics.htm), does not fall within another specific J category (e.g., camp counselor, intern, trainee), or any position that could bring notoriety or disrepute to the U.S. Department of State Exchange Visitor Program.

I affirm that this position is seasonal or temporary in nature, that my company has not experienced layoffs in the past 120 days, does not currently have workers on lockout or on strike and will not displace U.S. workers at the worksite listed on this form and that this position will provide opportunities for regular communication and interaction with U.S. citizens and allow participants to experience U.S. culture.

I understand that InterExchange is the U.S. Department of State designated sponsor of the Summer Work Travel J-I Visa program and the sponsor may at any time withdraw sponsorship from any participant in the event of non-compliance with the program regulations.

I attest that the relationship between the employer and student will comply with all Federal, State and Local laws regarding employment and occupational health and safety.

I attest that the position is available for the student for the entire employment period stated herein although conditions of employment may change due to unavoidable circumstances beyond my control. I further agree to notify InterExchange immediately if any of the terms of this offer change, if the student leaves or is terminated from the

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE

position or suffers any medical, psychological or criminal adverse effect.

I understand that the maximum duration for employment is 4 months (12 months for Australian and New Zealand students) as pertains to the dates stated on the student's DS-2019 form.

I understand that all students participating on the U.S. government regulated Summer Work Travel program are made aware of Federal Minimum Wage laws. I hereby agree to pay international students in accordance with minimum wage standards, but not less than what is customary for U.S. residents holding the same job.

Per IRS Employer Tax Guide and Publication 515, I understand that students on a J-1 Visa are considered non-resident aliens who are not subject to Social Security (FICA), Medicare or Federal Unemployment (FUTA) withholding taxes. I agree to consult a tax professional regarding state unemployment tax exemptions within my state.

I understand that the student will apply for and obtain a Social Security number that may not be available at start of employment. The DS-2019 form and I-94 card together will provide proof of authorization to work.

l agree to obtain advance permission in writing from the student for any payroll deductions or changes to deductions.

I certify that the employer maintains and extends Worker's Compensation coverage to employees if mandated by state law at student's work site.

If I agree to provide or assist in securing housing for the student I agree to provide housing that is safe, appropriate and compliant with all housing codes at reasonable cost and terms. Further, I understand that InterExchange is not responsible for paying housing deposits or costs.

I understand and agree that InterExchange cannot be held liable for the performance of the participant, nor for any civil or criminal liability incurred by the participant (including defense costs). Further, I understand that InterExchange cannot guarantee continuous employment coverage in the event student leaves position or is terminated.

I will indemnify and hold InterExchange harmless against any claims, liability, damages or costs incurred by reason of any act, error or omission of the employer or its agents.

I agree that any controversy, dispute or claim arising out of or in connection with this agreement, the relationship of the parties, or its interpretation, performance or nonperformance, or any breach thereof shall be determined solely in arbitration conducted in New York, NY in accordance with the then existing rules of the American Arbitration Association.

The U.S. Department of State Summer Work Travel regulations can be found by visiting the following website: j1visa.state.gov/wp-content/uploads/2012/05/2012- swt-ifr.pdf

Upon completion please return this form and any accompanying paperwork to the student. InterExchange must receive the completed Agreement from the student as part of their sponsorship application. InterExchange will contact you to obtain and verify your Federal Tax ID (EIN), a copy of the cover page/deck sheet of your workers' compensation policy and a copy of your business license or proof of current registration with the city or state in which your business is located.

| NAME OF EMPLOYER (PRINT) | TITLE | | SIGNATURE | DATE (MM/DD/YYYY) | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--|
| EMPLOYEE SECTION: (TO | D BE COMPLETED BY STUDENT SEEKING J-1 | /ISA SPONS | ORSHIP) | | |
| STUDENT Terms | | | | | |
| I hereby acknowledge that I have of this job offer. | e reviewed, understand and agree to all the terms | I further understand that failure to notify InterExchange of any change o employment or housing within one week may result in automatic termination from the program. | | | |
| | erstand that InterExchange may find this job offer unacceptable and I will not lowed to pursue employment with this company. se to work 4 months or less in total (12 months for Australian and New Zealand ents), and until the last date stated above. | | I understand that I must inform InterExchange of my intention to leave this | | |
| | | | employer and will not begin work at a new job prior to verification and conse by InterExchange. | | |
| | loyer nor InterExchange can guarantee the terms d responsibilities are subject to change according | I understand that I may be responsible for securing housing on my own before or upon arrival if it has not been included in this offer. | | | |
| to the needs of the employer or other unforeseen circumstances. I understand that the average number of hours per week is an estimate and is subject to change according to the needs of the employer. I agree to hold my employer and InterExchange harmless for any financial loss sustained by me as a result of the change in terms of this employment offer. I understand that either I or my employer may terminate the employment | | I have read, understand and agree to the paycheck deductions and further understand they may be subject to change. Further I understand that a separate agreement may be required for housing and transportation if provided by the employer. | | | |
| | | I understand that it may take up to two weeks to receive my first paycheck and have adequate funds to support myself during this time. | | | |
| relationship at any time with o employment laws. | lationship at any time with or without prior notice according to applicable nployment laws. | | In addition, by signing below, I am acknowledging that I have found this job through my own means and have not ourchased this job offer from a third party. | | |
| I agree to notify InterExchange in | mmediately if I am terminated from this position. | through my | | ob offer from a chira party. | |
| SIGNATURE OF EMPLOYEE/S | TUDENT | | | | |
| NAME OF EMPLOYEE (PRINT) | | | SIGNATURE | DATE (MM/DD/YYYY) | |
| NAME OF LOCAL AGENT | | | NAME OF UNIVERSITY | | |
| | | | | | |