WORK & TRAVEL USA	Work Start Date:	7
Employment Offer	Work End Date:	
STEP 1: Host Employer completes this form and sen	ds to Participant	
PARTICIPANT INFORMATION		
FIRST NAME MIDDLE NAME	LAST NAME	
EMPLOYER INFORMATION		
LEGAL BUSINESS NAME		
DOING BUSINESS AS	WEBSITE	
EMPLOYMENT LOCATION (Address where Participant w	ill work)	
STREET ADDRESS		
CITY	STATE ZIP	
CORPORATE ADDRESS (If different from Employment Lo	cation) Same as above	
STREET ADDRESS		
CITY		
	STATE ZIP	
MPLOYMENT CONTACT	BUSINESS OWNER Same as Employment C	Contact
	_	Contact
FIRST NAME	BUSINESS OWNER Same as Employment C	Contact
FIRST NAME	BUSINESS OWNER Same as Employment C	Contact
FIRST NAME LAST NAME TITLE	BUSINESS OWNER Same as Employment C	Contact
FIRST NAME LAST NAME TITLE PHONE MOBILE	BUSINESS OWNER Same as Employment C	Contact
FIRST NAME LAST NAME TITLE PHONE MOBILE EMAIL ADDRESS	BUSINESS OWNER Same as Employment C	Contact
FIRST NAME LAST NAME TITLE PHONE MOBILE EMAIL ADDRESS	BUSINESS OWNER Same as Employment C	
FIRST NAME LAST NAME TITLE PHONE MOBILE EMAIL ADDRESS PARTICIPANT POSITION	BUSINESS OWNER Same as Employment C	Yes No Mayb
FIRST NAME LAST NAME TITLE PHONE MOBILE EMAIL ADDRESS PARTICIPANT POSITION	BUSINESS OWNER Same as Employment C	Yes No Mayb
FIRST NAME LAST NAME TITLE PHONE MOBILE EMAIL ADDRESS PARTICIPANT POSITION JOB TITLE	BUSINESS OWNER Same as Employment O FIRST NAME	Yes No Mayb
FIRST NAME LAST NAME TITLE PHONE MOBILE EMAIL ADDRESS ARTICIPANT POSITION JOB TITLE STEP 2: Participant provides InterExchange this form	BUSINESS OWNER Same as Employment O FIRST NAME	Ves No Mayb
EMAIL ADDRESS PARTICIPANT POSITION JOB TITLE STEP 2: Participant provides InterExchange this for	BUSINESS OWNER Same as Employment O FIRST NAME	Ves No Mayb

received, reviewed, and approved by an authorized InterExchange representative. Continued sponsorship is contingent upon the successful execution of

and adherence to this agreement between the employer and named international exchange student.