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**Summer Work/Travel Application Form**

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| **PART 3-A – JOB OFFER & AGREEMENT**  to be completed by the employer | | | | | | | | | | | | | | |
| **NOTE TO EMPLOYER** | | | | A GeoVisions staff member will be contacting you to verify the information on this job offer. Department of State regulations **require** sponsors to collect 2 documents from employers at the same time as the job offer: | | | | | | | | | | |
| 1. A copy of the employer’s workers compensation insurance cover page or declarations sheet   (showing that the student will be covered while in the US) | | | | | | | | | | | | | | |
| 1. A copy of the employer’s Business License | | | | | | | | | | | | | | |
| **Please provide the above documents to student, agent, or sponsor at the same time as this job offer.** | | | | | | | | | | | | | | |
| **Student Information** | | | | | | | | | | | | | | |
| **Student Name** | | Click here to enter text. | | | | | | | | | | | | |
| **Start Date**  (Month/Day/Year) | | Click here to enter text. | | | | | **Note to Student:** This is the date you MUST be at your workplace and ready to begin work. Plan your travel in order arrive on time. Failure to arrive on time may result in cancellation of this job offer. | | | | | | | |
| **End Date**  (Month/Day/Year) | | Click here to enter text. | | | | | **Note to Student:** You are committing to work until this End Date. Do not sign this agreement unless you agree to work until this End Date. | | | | | | | |
| **Employer Information** | | | | | | | | | | | | | | |
| **Company Name** | | | | | Click here to enter text. | | | | | | | | | |
| **Company address where student(s) will work** | | | | | Click here to enter text. | | | | | | | | | |
| **Corporate Registered Name and address**  (if different from work location). | | | | | Click here to enter text. | | | | | | | | | |
| **Corporate EIN** (required by the State Department) | | | Click here to enter text. | | | | | **Worker’s Compensation Policy Number and carrier.** (Employer must also include policy’s Cover Page or Deck Sheet.) | | | | Click here to enter text. | | |
| **Business Phone** | | | Click here to enter text. | | | | | **Cell Phone** | | | | Click here to enter text. | | |
| **Website** | | | | | Click here to enter text. | | | | | | | | | |
| **Description of Company Activity** | | | | | Click here to enter text. | | | | | | | | | |
| **Job Information (Continued on next page)** | | | | | | | | | | | | | | |
| **Job Title** | Click here to enter text. | | | | | | | | **Wage per hour** | | Click here to enter text. | | | |
| **Are you offering this job directly, or through a third party?** | Click here to enter text. | | | | | **Who will issue the paycheck to this student?** Please note payroll company and contact info. | | | | Click here to enter text. | | | **What is the minimum wage in your state?** | Click here to enter text. |

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| **Estimated Average Hours Per Week** | Click here to enter text. | | | | | **Note to Student:** This is the average number of hours per week that your employer estimates you will work over the course of your program. This is not a guaranteed number of hours for each week. Hours may be reduced depending on business needs, weather, economic situations, your performance, sick time and other circumstances. | | | | | | | | |
| **Are overtime hours available?** | Click here to enter text. | | | | | | **Overtime pay rate** | | | Click here to enter text. | | | | |
| **Payroll Schedule** (weekly, bi-weekly, etc…) | Click here to enter text. | | | | | | **Description of Job specific training or orientations** | | | Click here to enter text. | | | | |
| **Is any bonus or incentive available?** | Click here to enter text. | | | | | | **If yes, please provide details** | | | Click here to enter text. | | | | |
| **Tasks to be performed on the Job** | Click here to enter text. | | | | | | | | | | | | | |
| **Are uniforms provided?** | Click here to enter text. | | | | | **Cost to student (or deposit) for uniforms.** | | | | Click here to enter text. | | | | |
| **Are there any requirements students should know about prior to arrival?** | | | | | | Click here to enter text. | | | | | | | | |
| **Are there any other deposits (other than housing)?**  Please note any equipment costs, training costs, or additional paycheck deductions. | | | | | | Click here to enter text. | | | | | | | | |
| **Housing Information**  Please include a copy of the housing agreement or lease | | | | | | | | | | | | | | |
| **Do you provide housing for the students?**  Yes or no | | |  | **If NO, please answer the below question:**  Where would you recommend students stay? Click here to enter text. | | | | | | | | | | |
| **If YES, please complete the rest of the information in this section.** | | | | | | | | | | |
| **Description of Housing?** | | | Click here to enter text. | | | | | | | | | | | |
| **Address of Housing?** | | | Click here to enter text. | | | | | | | | | | | |
| **Is there a housing deposit?**  Yes or no | | | Click here to enter text. | **How much is the Housing Deposit?** | | | | | Click here to enter text. | | | **Is it refundable?** | | Click here to enter text. |
| **When is the deposit due?** | | | Click here to enter text. | | | | | | **Are there any conditions for a refund?** | | | Click here to enter text. | | |
| **What is the weekly cost for housing?** | | | Click here to enter text. | | | | | | **What other costs will students need to pay** (utilities, phone, etc.)? | | | Click here to enter text. | | |
| **What is included in the housing cost?** | | | Click here to enter text. | | | | | | **What is not included in the housing and how much will it cost?** | | | Click here to enter text. | | |
| **How many people share the housing?** | | | Click here to enter text. | | | | | | **Number of bedrooms and bathrooms?** | | | Click here to enter text. | | |
| **How many students per bedroom?** | | | Click here to enter text. | | | | | | **What furniture is provided?** | | | Click here to enter text. | | |
| **Distance from housing to worksite?** | | | Click here to enter text. | | | | | | **Distance to nearest supermarket?** | | | Click here to enter text. | | |
| **Is transportation provided to work?** | | | ☐YES  ☐NO | **If NO, please describe available local transportation.** | | | | | Click here to enter text. | | | | | |
| **If YES, please indicate any cost for this transportation.** | | | | | Click here to enter text. | | | | | |
| **Cultural Activities**  Host employers are expected to actively plan, encourage and be involved in at least one cultural event or activity each month for program participants. | | | | | | | | | | | | | | |
| **Please list 4 cultural activities you expect to plan for students:**  **Activity 1:** Click here to enter text.  **Activity 2:** Click here to enter text.  **Activity 3:** Click here to enter text.  **Activity 4:** Click here to enter text. | | | | | | | | | | | | | | |
| **Job Offer - For the Employer to Sign:** | | | | | | | | | | | | | | |
| By signing below, I agree that the information above is correct, and I am offering the student(s) listed above a seasonal/temporary job for the dates listed on this offer. I agree that the wages offered are comparable to those of Americans in similar positions, and that this offer does not take employment away from qualified American applicants. I have not laid off workers in the last 120 days, and do not have workers on lockout or on strike. I understand that if my plans change, and this (these) position(s) will not be available, or will be substantially changed from the description above, I must notify GeoVisions immediately so that students may be given an opportunity to choose another position. I understand that if any student fails to adequately perform the requirements of the position(s), I may terminate that student, in which case I agree to immediately notify GeoVisions. I also agree to notify GeoVisions immediately when student(s) arrive to begin their work, are not meeting the requirements of the job, or leave ahead of the planned departure date. I will also advise GeoVisions of any emergency impacting the health, safety or welfare of the student(s). I understand that the Summer Work/Travel Program is a Cultural Exchange program, and I agree to assist any students on the program in meeting Americans, and assist them in learning about America to the best of my ability, including arranging cultural activities that will help meet this goal. I understand that neither I nor any members of my staff may threaten any student with deportation or any negative impact on their visa status or ability to remain in the United States. If I have any questions regarding the above, I will call GeoVisions at 1-888-830-9455 prior to signing this form | | | | | | | | | | | | | | |
| **Employer Name** (Please print) | |  | | | | | | **Title** | | |  | | | |
| **Employer Email:** | |  | | | | | | **Employer Contact Number:** | | |  | | | |
| **Signature** | |  | | | | | | **Date**  (Month/Day/Year) | | |  | | | |
| **PART 3-B**  **Job Offer -** For the Student to Sign | | | | | | | | | | | | | | |
| By signing below, I agree that the information above (or in the Job Offer I have attached) is consistent with my understanding of the job I have been offered. I agree to arrive at my place of employment as directed in time to begin working on the Start Date on this offer. I agree to work until the End Date on this Job Offer. I understand that my employment can be ended with or without cause if the employer finds it necessary. I agree that if must leave this job, I will contact GeoVisions. I will also inform my employer at least two weeks in advance of my plans to leave. I understand that hours of work are not guaranteed, and are subject to change due to circumstances related to business, acts of nature, and my personal performance. I understand that I cannot begin working at a new or second job without the written permission of GeoVisions. I understand I must read, sign, and agree with the Terms and Conditions in Part 4 of this application. | | | | | | | | | | | | | | |
| **This job offer is for (please check one):**  ☐ Primary Job ☐New (replacement) Primary Job ☐ Second (or additional) Part-time Job | | | | | | | | | | | | | | |
| **Name** (Please print below) | | | | | **Signature** (sign below) | | | | | | | | **Date** (date below) | |
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