



**Employer Section:** Please read and complete the following section below (use additional paper if necessary).

Date: (month /day/year) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

I hereby certify that, \_\_\_\_\_ from \_\_\_\_\_  
name of student student's country

has been offered employment with our company, \_\_\_\_\_  
name of company

Tax ID Number: \_\_\_\_\_

Address: \_\_\_\_\_  
street city state zip

Contact Person (and title): \_\_\_\_\_ Business Phone: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Dates of Employment\* (month /day/year) Start: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ End: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ \*(maximum four months)

Job Title: \_\_\_\_\_ Wage per hour (excluding tips and/or bonuses): \_\_\_\_\_

Average number of work hours per week: \_\_\_\_\_ Housing Available: Yes No Housing Deposit (if any): \_\_\_\_\_

Please describe type of business and job: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Housing cost per week/month (if any): \_\_\_\_\_ Please use the space below to describe the housing provided or how you will assist in finding housing for your employees (InterExchange employers are responsible for housing students). Also, use the space provided for any comments, contractual obligations and additional information regarding the employment of this prospective employee (bonuses, benefits, etc.) Attach a separate sheet if needed.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IMPORTANT \*\*** An InterExchange representative will be in contact with the employer at his/her place of business to verify the information on this agreement. Without confirmation of this job offer, InterExchange will be unable to offer sponsorship to the prospective employee.

_____	_____	_____	_____ / _____ / _____
Name of Employer (print)	Title	Signature	Date (month/day/year)

**Employee Section:** Please read and complete the following section below.

In accepting the position above, I agree to work four months or less in total, and until the last day of work stated above. I understand that either I or \_\_\_\_\_ can terminate the employment relationship at any time with prior notice to the employer and InterExchange (customary practice: Name of Company two weeks advance notice by the employee) for any reasons not prohibited by law. I understand that my duties and responsibilities may vary during the period of my employment.

_____	_____	_____ / _____ / _____
Name of Employee (print)	Signature	Date (month/day/year)

