

Center for International Career Development (CICD)
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2015 Work and Travel Employment Verification (EV)

PARTICIPANT INFORMATION										
J-1 Participant First Name		J-1 Participant Last Na	me	Gender						
LICOT COMPANY INFORMATION				Female Male						
HOST COMPANY INFORMATION										
Legal Business Name (MUST provide of	copy of business license)		Workers Comp Provider (MUST provide copy of workers comp declaration sheet)							
Doing Business As (DBA) or Trading N	ame		Workers Comp Policy #							
Federal Tax ID # (EIN)			Host Company Website							
Worksite Address (address where parti	icipant will work)		Name and job title of person authorized to hire Participant							
City	State	Zip	Email	Telephone Number						
Worksite Telephone Number	Off-season Phone Num	ber	Name and job title of worksite supervisor							
Fax Number	Skype ID		Email	Telephone Number						
JOB INFORMATION			JOB DETAILS AND WORKPLACE ENVIRONMENT							
Job Title			Describe the seasonal or temporary nature of the job							
			,							
Job Start Date (mm/dd/yy)	Job End Date (mm/dd/y	y)	Describe job details, requirements, duties, physical demands (e.g., lifting, standing, repetitive motions, hot cooking surfaces), any type of quotas that participants must meet							
Flexible Start Date	Flexible End Date		and if specific skills or experience is required							
Yes No	Yes No									
If yes, describe flexibility	If yes, describe flexibility	/								
Estimated work hours per week From (low) To (high)	Estimated # of work day	s per week								
Note: Although the Host Company agrees to make a good-faith effort to provide the hours listed on this EV, it is understood that actual hours can change based on business needs, Participant performance, weather, natural disasters, etc.										
Hourly Wage	Pay Frequency		Describe workplace environment (e.g., inside, outside, hot and sunny, cold, noisy)							
\$										
Tips Available Yes No Maybe	Estimated tips per shift \$0 - \$									
Are overtime opportunities available	Overtime Rate									
Yes No Maybe	\$									
Is there a training period Yes No	Hourly wage during training period Describe uniform / dress code / grooming standards / prohibited personal effects (e.g. visible piercings, tattoos, etc.)									
If there is a training period, describe nu	mber of days, hours per	day, etc.								
Describe any initial costs Participant m	ay incur upon arrival (e.g.	, training, uniforms, etc.)								
Describe any regular payroll deductions	s (e.g., rent, transportatio	n, meals)	Describe the surrounding community (e.g., rural, urban, resort)							
Note: Any payroll deductions must be a this EV), and must be itemized on Parti		Participant (separate to	List cultural activities and events you will recommend to participants and/or will be organizing (e.g., museums, company outings, festivals, historic sites, etc.)							
If a meal plan is available at Host Com	· · · ·	g., cost, frequency)								
Schedule allows for secondary jobs										
Yes No Note: All secondary jobs must be vette	ed and authorized by CICI	D prior to the beginning	IMPORTANT SOCIAL SECURITY AND E-VERIFY INF	ORMATION						
of employment	-		Please indicate what delay, if any, Participant can expect in relation to his/her Social							
Level of English required for this job Beginner Intermediate	Advanced I	Native Speaker	Security Number (SSN) and E-Verify. Check all that apply:							
W4 and W2 forms will be completed (N		•	Participant can begin work, only after receiving SSN							
Yes No			Participant can begin work, but will not get paid, before receiving SSN							
Participants and U.S. staff receive the s	same pay for the same jo	b position	Participant can begin work, and get paid, only after applying for SSN Participant can begin work, and get paid, regardless of SSN status							
Drug/substance test required? Yes No	If yes, describe									
Additional information such as an empl	oyee handbook attached	or provided separately	E-Verify required by Host Company (Note: E-Verify process could cause delay in issuan	ce of 1 st navcheck to Participant						
Yes No										
Oi-market and the David Control		D-1	Olaman of Anathanian III (O							
Signature of J-1 Participant		Date	Signature of Authorized Host Company Repr	esentative Date						

Is housing prearranged by Host Company or its representatives Yes, housing is arranged by Host Company No, Participant must find their own housing Maybe, assistance available, but housing is not guaranteed If yes: Is Participant required to stay at provided housing Yes No Is Participant required to sign a housing agreement Yes No If yes, please provide copy of the Housing Agreement to CICD Name and telephone number of Housing Contact				Describe type of housing (e.g., house, apartment, dorm-style, motel, etc.), and list provided amenities (e.g. does housing have bunk-beds, double beds, air mattresses; does it include bedding, towels, heating/air conditioning, kitchen supplies, microwave, refrigerator, stove/oven, table/chairs, Internet, laundry facilities)					
Email				furnished	Housing has full ki	itchen Do	·		
Distance to amenities (e.g., stores, restaurants, city center)			Yes No Approximate # of peop		Yes No	Ap	Yes No pproximate # of people per	house/apt:	
· ·			HOUSING DEPOSIT DETAILS						
HOUSING COST DETAILS (i.e., RENT) Cost of Rent Estima		ted cost for utilities if NOT	Deposit R	Deposit Required Deposit Amount Refundable deposit amo			ount		
\$ per Rent includes		d in rent \$ rent collected and at what	Yes When is th	No \$ sne deposit refunded					
Internet Water Electricty	frequer		·						
Phone Cable TV Sewage Other:			For what reasons will a deposit NOT be refunded						
TRANSPORTATION			Į.	ARRIVAL	INFORMATION				
Transportation to and from worksite is prov	vided	Transportation to Social Se office provided Yes	ecurity No	Nearest Maj	or Airport	Ne	earest Train and/or Bus St	ation	
Cost of Provided Transportation	Cost of Social Security tran				Cost of pick-up services				
\$ per Name, phone, and email of transportation	provider	\$ per		provided at arrival Yes No \$ Name, phone, and email of pick-up provider					
					· .				
Other methods to get to worksite or ameni Bus Subway Train Other:	ities	Participant can safely walk or bike to work on sidewalks or bike lanes		advance of	p need to be arrang arrival	ed in lit y	yes, please describe		
Bike Walking Taxi		Yes No	Yes No						
PARTICIPANT AGREEMENT I, the Participant, have read and fully under		his antine anno mat (0 mar)		HOST CO	MPANY AGREE	MENT			
including this page), confirm, agree with at 1. To work for the Host Company for the ti 2. To give immediate written notification to dates of employment or terminate the emp	iditions: ny ability. y alter the	and agree that: 1. Host Company (HC) Verification: HC authorized representative has reviewed							
 That I cannot, under any circumstances, begin to work for any employer (include one listed on this EV) until CICD has completed its vetting process with that compunderstand that failure to comply with this rule can result in program termination. That I have received adequate and appropriate pre-arrival information from my agency and CICD to prepare me for this program and I have read all provided ma If I have any questions or concerns about any housing contracts (or any other referor or during the program) I shall immediate contact CICD <u>before</u> signing any contract(s), as it is my responsibility to do so. That failure to do so, or failure to comply with enumerated program regulations 				mpany. I Host Company Application and Agreement, all of the information provided by HC is true					
				2. Host Company Responsibilities: participants shall not be threatened with program termination or deportation; HC shall notify CICD promptly when: Participants arrive at the work site(s) at onset of program; if there are any changes in job placements before or during the Participants' programs, if Participants are not meeting the requirements of their job placements, if Participants leave their positions prior to planned departures; in the event of any emergency or any situations that may impact health, safety, or welfare					
checking in with CICD upon arrival, responder residence, not starting work at unverified outreach/monitoring efforts, etc.) can resumed and the start of the star	olly s "at will" staffing	3. Arbitration and Choice of Law: Any unsolvable dispute or disagreement that may arise from this Employment Verification shall be referred to a single arbiter agreed upon by the parties, or if no single arbiter can be agreed upon, an arbiter or arbiters shall be selected in accordance with the rules of the American Arbitration Association. Choice of Law: and that all disputes arising from this document shall be governed by and resolved in accordance with the laws of the State of Washington, USA. No other law shall be applicable. Any lawsuit in connection with this document in any manner may only be brought in King County, Washington, USA.							
company's local business economy and of weather, my own violations of company pt 10. That all information disclosed to me by regarding this job offer shall be deemed or entities, and used only for the purposes of 11. Not to use this EV for any purposes no fraudulently use a DS-2019 form. Hold Harmless: By signing below I under participate in accordance with the rules an	sentatives D-affiliated others, or all ; CICD	challenges which may lead to the expulsion, firing, dismissal or termination of the Participant's program participation at the sole judgment and discretion of CICD; CICD is the visa Sponsor organization and can in no way be construed to be the employer of the Work and Travel Participant in the U.S.; The HC is the employer for the duration of the							
cannot guarantee or assure that there will not be problems or challenges which may lead to changes in my program, my expulsion, firing, dismissal or termination of my program. I understand termination is at the sole judgment and discretion of CICD. CICD is my J-1 visa Sponsor organization and can in no way be construed to be my employer. The Host Company named in this contract is my employer for the duration of the agreed-upon employment. I do hereby promise, undertake and guarantee to hold CICD harmless and to indemnify CICD and all other persons connected with the Work and Travel program from all liabilities, claims, actions, damages, expenses and losses of any nature whatsoever that I may cause or be caused by any aspect of the program or any other person(s) connected with the program.				s. Temporary Position: The HC is offering only temporary or seasonal employment or its own free will to the Participant, and has not received compensation or incentives. 6. Verify participant dates: Obtain copy of participant's DS 2019 form upon arrival. J-1 participants are legally authorized to work within the dates listed on their DS 2019 form. Contact CICD to ensure that participant's program is in good-standing. 7. The primary purpose of the J-1 Work and Travel program is cultural exchange.					
									Signature of L-1 Participant

HOUSING INFORMATION