2016

Host Organization Information Form



Your International Connection to a World of Talent

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Instructions:

The following information is a required in order to participate in the J-1 visa program.

- 1. Please complete all items carefully. The more we know about your organization, the better we can serve your needs
- 2. Please provide a copy of your business license, worker's comp certificate and completed W-9 form with this form
- 3. Sign and return this form to International Educational Exchange at the email address listed above.

Company Information				
Name of Company		Is Company An	nual Revenue > or < 3 Million	
Type of Company/Company Activities You may	include additional materials such as company su	ummary or brochures to b	etter describe your company	
Business License Number (a copy of the license	se must accompany this application)	Employer Ident	ification Number (EIN)	
Workman's Compensation Insurance Carrier	(a copy of the license must accompany	y this application)	Policy Number	
Corporate Address				
Phone Number	Fax Number		Website	
Address of primary training site	City	State	Zip Code	
First Point of Contact for J-1 programs for t	the Property:			
Name:				
<u>Title</u> :				
Phone Number:				
Email Address:				
*All additional supervisors to the J-1 progra Training Acknowledgement Form. This mus in the J-1's program. Please keep the TAF o	st be completed for any person who h	has been named a s		
Has this organization ever hosted an exchange	visitor in the past? Work and Trav	vel Intern	Trainee	
Are you currently hosting J-1 participants that	are sponsored by another agency? Y	es No		
If yes, how many Interns	TraineesNot Sure			
Please list the names of the other J-1 visa spons	sors you are currently working with:			
Current # of full time U.S. Employees at the pr	operty in total (if it fluctuates, a range	is fine):		
Current # of employees in department(s) which	n J-1 participant will be placed:			
Front Office Culinary	Food and Beverage Service	Other	_	
Number of interns/trainees that will be placed i	in each department:			
Front Office Culinary	Food and Beverage Service	Other	_	
Has this organization hosted any J-1 interns/tra	inees under our sponsorship within the	e last 3 years?	Yes No	

Additional Information

Will the participant(s) be required to take a drug test? Yes No



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Will the participant(s) be required to complete any other form of medical exam prior to starting program? Yes No			
If yes, please explain			
Are meals provided to the J-1? Yes No If Yes, details:			
Are uniforms provided to the J-1? Yes No If Yes, details:			
If uniforms are not provided, describe what type of standard attire the participant(s) will be required to wear during their training:			
Any additional benefits:			
<i>Wages</i> (Please complete the relevant wage information):			
Culinary Interns: per hour Culinary Trainees: per hour			
Front Office/Rooms Interns: per hour Front Office/Rooms Trainees: per hour			
Food and Beverage Interns: per hour Food and Beverage Trainees: per hour			
J-1 participants will be paid weekly every two weeks monthly.			
Transportation and Housing			
What airport should the participant(s) fly into?			
Directions for Arrival, i.e. preferred arrival times or days of the week, pick-up arrangements and contact details			
Is transportation from the airport paid for by host organization? Yes No			
What transportation will be available to the participant(s) from the airport to the property and/or housing? Taxi Bus Shuttle Subway Other			
If not company provided, what are the estimated costs for transportation to the training site from the airport?			
What means of transportation will be available for the participant(s) to commute to and from the training site? Taxi Bus Subway Walk Bike Company provided Other			
Do you recommend participant purchase an automobile? Yes No			
Is housing provided by the host organization? Yes No			
If yes, for pre-arranged housing, please indicate: Monthly Cost: \$ Security Deposit Required: \$			
**If yes, please also complete the Housing Information Form provided			
If no, please describe how your company will assist participant(s) to locate housing and the estimated cost for rent and security deposit:			

J-1 Participant's Orientation

Please state how the participant(s) will be oriented to your business/company

Please state how your business/company will assist the participant(s) in getting oriented to the community:



Cross-cultural activity is an activity designed to promote exposure and interchange between exchange visitors and Americans so as to increase their understanding of each other's society, culture, and institutions. What type of cultural activities are in the area and how will the participant(s) gain exposure to these activities?

Please describe your evaluation process. Aside from the mandatory midpoint and final evaluations completed by both the supervisors of the program and the J-1that are submitted to IEE, what type of feedback will the participant(s) receive in order for them to progress in their program?:

How did you hear of International Educational Exchange, Inc? ____

By signing below you agree that all information contained on this form is accurate and you have authority to sign on behalf of the Host Company.

Representative Printed Name

Signature

Date

ADDITIONAL REQUIRED DOCUMENTS:

Please provide actual copies of the following documents along with this application: Business License Copy of Current Worker's Compensation Insurance Certificate. Copy of W-9 (Employer Identification Number)