



# Summer Work Travel Program

## JOB OFFER FORM

**CSB International, Inc.**  
 119 Cooper Street  
 Babylon, NY 11702  
 Phone: 1-877-669-0717  
 Fax: 1-631-893-4547  
 info@csb-usa.com  
 www.csb-usa.com

### EMPLOYER SECTION

**COMPANY NAME:** \_\_\_\_\_ **Business type:** \_\_\_\_\_  
**Employer identification number (EIN):** \_\_\_\_\_ **Workers Compensation Insurance Policy Attached:** ☐  
 (A copy must be included with each signed job offer)  
**Complete mailing address:** \_\_\_\_\_  
 \_\_\_\_\_ Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_  
**Address of work site (if different from above):** \_\_\_\_\_  
 \_\_\_\_\_ Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_  
**Primary contact:** \_\_\_\_\_ **\*Office no:** \_\_\_\_\_  
**Mobile no:** \_\_\_\_\_ **\*\*E-mail:** \_\_\_\_\_  
**Emergency no:** \_\_\_\_\_ **Fax no:** \_\_\_\_\_  
**Website address:** \_\_\_\_\_  
**Name of supervisor:** \_\_\_\_\_ **\*Office no:** \_\_\_\_\_ **\*\*E-mail:** \_\_\_\_\_

*\*An office number must be provided. \*\*No personal e-mail addresses.*

### Dates of Employment and Requirements

**Start date\*:** Earliest \_\_\_\_\_ Latest \_\_\_\_\_  
 \_\_\_\_\_ month/day/year \_\_\_\_\_ month/day/year  
**End date\*:** Earliest \_\_\_\_\_ Latest \_\_\_\_\_  
 \_\_\_\_\_ month/day/year \_\_\_\_\_ month/day/year  
**English level:** ☐ Basic ☐ Intermediate ☐ Advanced **Social Security Number must be issued to begin working:** ☐ Yes ☐ No  
**Skills required:** \_\_\_\_\_  
**Prerequisites:** \_\_\_\_\_ **Physical demands:** \_\_\_\_\_

*\*Up to a maximum of 4 months. The student is eligible to work only during the program dates as stated on the Form DS-2019. These dates observe the limits of his/her official summer vacation*

### Job Information

**Job title:** \_\_\_\_\_ **Job description:** \_\_\_\_\_  
 \_\_\_\_\_  
**Wage per hour:** \$ \_\_\_\_\_ **Minimum hours per week\*:** \_\_\_\_\_ **Overtime available:** ☐ Yes ☐ No  
**Is training paid?** ☐ Yes ☐ No **How much per hour?** \$ \_\_\_\_\_ **Training period duration:** \_\_\_\_\_  
**Payment schedule:** ☐ Weekly ☐ Every two weeks ☐ Monthly ☐ Other \_\_\_\_\_  
**Is an end of season bonus available?** ☐ Yes ☐ No **If yes, how much?** \$ \_\_\_\_\_  
**Are meals provided?** ☐ Yes ☐ No **Cost of meals per day:** \_\_\_\_\_  
**Dress code:** ☐ Yes ☐ No **If yes, explain** \_\_\_\_\_  
**Cost of uniform:** \$ \_\_\_\_\_ **Grooming requirements:** \_\_\_\_\_

*\*We recommend at least 30 (thirty) hours a week. Hours per week our general in nature and may be subject to change.*

### Housing

**Housing availability\*:** ☐ Yes ☐ No ☐ Will assist in finding  
**Address of housing:** \_\_\_\_\_  
 \_\_\_\_\_ Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
**Number of students per room:** \_\_\_\_\_ **Number of bathrooms:** \_\_\_\_\_  
**Type of accommodation:** ☐ Private house ☐ Dorm style ☐ Hotel/Motel ☐ Apartment ☐ Bunk house  
**Housing is:** ☐ Completely furnished ☐ Mostly furnished ☐ Unfurnished  
**Cost of housing per week:** \$ \_\_\_\_\_ **Utilities included:** ☐ Yes ☐ No  
**Cost is payroll deducted:** ☐ Yes ☐ No **Housing deposit amount** \$ \_\_\_\_\_ **Refundable amount:** \$ \_\_\_\_\_  
**Housing deposit refund policy:** \_\_\_\_\_  
**Lease is required:** ☐ Yes ☐ No **Length of lease:** \_\_\_\_\_  
**Distance between work & housing (miles):** \_\_\_\_\_  
**Transportation method:** ☐ Walking ☐ Public ☐ Employer provided ☐ Must arrange own transportation  
**Estimated cost per day (round trip):** \$ \_\_\_\_\_

*\*Generally, the first month rent and deposit are due upon arrival. Generally, housing facilities have basic furniture, with no kitchen utensils, cookware, linens or towels provided. Students may need to bring or purchase necessities for healthy a lifestyle.*



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### EMPLOYER SECTION

#### Arrival Instructions\*

Pick-up provided: ☐ Yes ☐ No

Day: ☐ Weekdays only (M-F) ☐ Anytime

If Yes, arrival airport / station: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Between: \_\_\_\_\_ AM \_\_\_\_\_ PM

\*Students should fly into the requested arrival city. If they fly into another airport, they can take the bus/train to the final destination

Details\* (where, when, conditions): \_\_\_\_\_

\_\_\_\_\_ Pick up cost per person: \$ \_\_\_\_\_

If No, advisable way to arrive at the host site/housing: \_\_\_\_\_

After arrival, report to: \_\_\_\_\_ Hours of contact: \_\_\_\_\_ AM \_\_\_\_\_ PM

Contact name

Full address: \_\_\_\_\_

Phone no: \_\_\_\_\_ Email: \_\_\_\_\_

Street address

City

State

Zip

\*Arrival information must be sent to CSB International, Inc. by the International Representative, with minimum 15 days before the scheduled arrival in the United States.

#### Social Security Number

Participants will arrive directly to their host sites and will be able to apply for the Social Security Number after arrival.

Does your company offer Social Security Application assistance?: ☐ Yes ☐ No ☐ Not applicable (Job offer provided after arrival in the US)

If yes, contact person: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Social Security Administration Office: \_\_\_\_\_ Distance(miles): \_\_\_\_\_

Street Address

City

State

Zip

#### Area Information

Work site is best described as: ☐ Remote ☐ Suburban ☐ Ocean ☐ Metropolitan

Nearest major city: \_\_\_\_\_ Distance (miles) : \_\_\_\_\_

Public transportation access: ☐ Walking distance ☐ Requires additional transportation

#### Accessible Amenities:

Grocery store: ☐ Walking distance ☐ Transportation

Public library: ☐ Walking distance ☐ Transportation

Post office: ☐ Walking distance ☐ Transportation

Movie Theater: ☐ Walking distance ☐ Transportation

Bank: ☐ Walking distance ☐ Transportation

Restaurants: ☐ Walking Distance ☐ Transportation

**Responsibilities of the Employer** according to the United States Department of State and sponsor regulations governing the program:

- Our company acknowledges that the below accepted program participant is sponsored by CSB International, Inc. and he/she is considered by the United States Government to be the continuing responsibility of CSB (the sponsor).
- Our company wishes to participate in the Summer Work Travel Program as a third party and agrees to provide all information required by the sponsor to vet this job offer and cooperate with the sponsor, as needed. This is certified by the signature of the person completing the form.
- Our company will provide a suitable work situation for each participant, with wage and work conditions consistent with that required of the American counterparts, and in compliance with applicable federal and state law concerning employment. At minimum, participants must be compensated at the prevailing local wage, which must meet the higher of the applicable State or Federal Minimum Wage.
- Our company will provide participants the approximate number of hours of paid employment per week as identified on the job offer and agreed to during the job vetting process.
- Our company will pay those participants eligible for overtime worked in accordance with applicable state and federal law.
- If housing is provided, our company certifies that the facility is in compliance with applicable federal and state law concerning housing.
- Our company will disclose in writing to the sponsor any fee, expense or cost that is assessed to and paid by any participant.
- Our company must notify the sponsor promptly:
  - When the participant arrives to begin his/her program. Our company shall encourage the participant to inform the sponsor of his/her residential address in the United States within 10 days of arriving, as required by the United States Department of State. Participants must visit the sponsor's main website [www.csb-usa.com](http://www.csb-usa.com) and fill out the Check-in form. Our company shall contact the sponsor if the participant does not arrive at all.
  - When there are any changes or deviations in the job placement during the participant's program. Our company shall immediately contact the sponsor if conditions that may lead to the job revocation have occurred.
  - When the participant is not meeting the requirements of his/her job placement. Our company shall be responsible for dealing with issues involving the participant such as poor performance, but shall notify the sponsor immediately and cooperate with the sponsor.
  - When the participant leaves his/her position ahead of his/her planned departure. Our company shall notify the sponsor within 24 hours of the disappearance of any accepted participant.
- Our company agrees that it shall not, without the written consent of the sponsor, assign or subcontract any of its obligations hereunder. The company agrees that it will not transfer any participant to another location or work site without prior written notification to the sponsor. The company shall provide to the sponsor, in writing, contact information for each participant and shall update the information in writing within 48 hours of any changes in such information.
- Our company is responsible to provide the Form W-2 once the employment has been completed so the participant can file a tax return request with the Internal Revenue Service. The company must take note of the participant's home address and send the form to his/her home country.

I, the undersigned, am authorized by our company to extend job offers to the program participants. I hereby certify that the above mentioned participant has been offered employment in our company and all the details included in this job offer agreement are true to my knowledge.

Person completing form (print): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

month/day/year

Are you an employee of the company? ☐ Yes ☐ No If Yes, please specify title: \_\_\_\_\_

If No, please explain relationship with company: \_\_\_\_\_

Name of Accepted

Participant

Participant (print): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

month/day/year



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### APPLICANT SECTION

I am fully **responsible** for **reading thoroughly** and **asking the recruiter for clarifications** prior to signing.

1. I will participate in the program only during my official university summer vacation, up to a maximum of 4 (four) months. (Please also see the program application agreement, #4)
2. By accepting this job offer, I understand and agree that am eligible to work solely within the program dates specified on my Form DS-2019, not earlier and not later. (Please also see the program application agreement, #9)
3. If no earlier departure is indicated on my I-94 card, I will leave the United States upon completion of my program, on time for the first day of school and no later than 30 (thirty) days (otherwise known as the grace period) after the end date listed on the Form DS-2019. I am not authorized to work during the grace period however I can enjoy travel opportunities. (Please also see the program application agreement, #10)
4. I must report directly to my site of activity according to my Form DS-2019 start date and respecting the arrival instructions, no later than 3 (three) business days after the start date on the form. I may arrive no more than a week prior to the start date on my form DS-2019 and if so, I must report directly to my site of activity within 3 (three) days of my arrival in the United States. Failure to report to my site of activity on time may lead to my status being reported "No Show". I also understand that such action may create legal difficulties that will affect my future travel, study or work in the United States at any time in the future. (Please also see the program application agreement, #11)
5. By accepting this job offer, I am in the agreement that I will work in this site of activity throughout the entire period covered by my Form DS-2019, unless otherwise noted. Should I must leave the program earlier than scheduled, I must contact CSB and the employer for permission (in writing). (Please also see the program application agreement, #15)
6. I understand that it may take up to 7 (seven) business days before I begin working and that my exact location, position, duties and responsibilities may vary during the period of my employment, due to arrival date, position availability, English level, skills required, weather conditions and other events out of the employer's control. This timeline may be longer if my employer requires that I have my Social Security Number issued before I start working. (Please also see the program application agreement, #17)
7. The compensation and expenses of my position are specifically detailed and I must carefully read them before I sign the job offer. (Please also see the program application agreement, #18)
8. Overtime, tips and higher pay doing night shifts or second jobs are not guaranteed to anyone. (Please also see the program application agreement, #19)
9. I understand and agree that the job offer agreement could partially or entirely change prior to my arrival or during the program, including, but not limited to details about the job, housing, deposit and other contractual obligations. The terms are general in nature, and the hours and the final position may be subject to change.
10. It is solely my responsibility to cover the transportation expenses while in the program, including but not limited to arriving in/departing from the United States. It is also my responsibility to arrange transportation to and from work and cover all expenses associated with it. (Please also see the program application agreement, #25)
11. I must bring a minimum of \$800 to support myself once I arrive in the United States. This amount is exclusive of the housing expenses (first month rent and housing deposit) and transportation. It may take up to 3 (three) weeks until the first paycheck will be issued. (Please also see the program application agreement, #31)
12. Most of the pre-arranged jobs include shared housing and I should expect the basics. I may be required to bring or purchase items necessary for a healthy lifestyle (for example, linens, towels, kitchen utensils and cookware). If I am placed in a site that provides and/or assists with housing, I will be required to use this housing facility for the duration of my program as the employer might have made a financial commitment to the housing site. If I am placed in a site that does not provide housing, I must carefully read and sign the "NO Housing Form" provided to me by CSB before accepting the job offer, as I will be required to locate housing on my own and submit a proof of my housing address to my local CSB International Representative with at least 15 (fifteen) business days prior to my arrival in the United States. (Please also see the program application agreement, #23)
13. I have completed my budget sheet based on the minimum amount of money guaranteed by my job offer and that I have made an accurate assessment of how much money is left after I pay taxes and all my daily living expenses.
14. Permission to change jobs will be granted only if the employer has violated the terms of my job offer. CSB must investigate any claim before taking a decision. If I leave without permission (in writing) from CSB, my program may be terminated and I will be required to return home. I also understand that such termination may create legal difficulties that will affect my future travel, study or work in the United States at any time in the future. If permission is granted, I must submit a new signed job offer and I may start working only after CSB has vetted my new job offer, by contacting the employer. (Please also see the program application agreement, #20)
15. If I accept a job offer from CSB, the job offer could be revoked prior to or during my program, for reasons not prohibited by law or out of the employer's control such as low business demand, weather, etc. Should my position or conditions of employment be revoked, CSB will assist me in finding alternative employment, but CSB makes no guarantee that it will be successful and that it can find a similar job, with similar conditions in a similar location. If I accept an alternative job offer, I will be required to be committed to work in that site of activity until the end date of my Form DS-2019. (Please also see the program application agreement, #22)
16. If I am fired from my job for any specific reason concerning my attitude, performance or actions, I may not be allowed to continue my program and I may be asked to return home immediately at my own expense. (Please also see the program application agreement, #21)
17. I will observe and obey all United States federal, state and local laws. If I break the law, I understand that CSB will not be able to help me and I will be terminated from my program. (Please also see the program application agreement, #32)
18. I will respect all CSB (please read carefully the application agreement) and Department of State Program rules, in regards with my employment and program participation, including the rules of conduct required by the employer. (Please also see the program application agreement, #33)
19. I understand and agree that it is in my best interest and my full responsibility to keep a copy of all documents I sign and that I am responsible for keeping them in my possession together with my program agreement, Form DS-2019 and budget sheet during my stay in the United States.
20. I have willingly and carefully read this job offer form, I understand, agree and meet all qualifications, and accept the job offer with all conditions offered herein.

Summer Work Travel Participant (print name): \_\_\_\_\_

Summer Work Travel Participant (signature): \_\_\_\_\_ Date: \_\_\_\_\_  
 month/day/year

CSB International Representative (company name): \_\_\_\_\_

Responsible Recruiter (print name): \_\_\_\_\_

Responsible Recruiter (signature): \_\_\_\_\_ Date: \_\_\_\_\_  
 month/day/year

### Self Placement Confirmation

If you are a self-placement student please state how did you find your job: *(Please check one)*

☐ International representative ☐ Employment Agency ☐ Directly with the employer ☐ Internet

☐ Other: \_\_\_\_\_

I acknowledge that any false information may lead to an immediate dismissal from the program. (Please also see the program application agreement, #5)

Summer Work Travel Participant (signature): \_\_\_\_\_ Date: \_\_\_\_\_  
 month/day/year