

CAREER TRAINING USA

Host Employer Requirements

To view the most up-to-date Employer Requirements, please visit: <http://www.InterExchange.org/ct-employer-requirements>

The InterExchange Career Training USA program is overseen by the U.S. Department of State. Under the program regulations, employers in our program must:

- Have a Federal Identification Number and a Dun & Bradstreet (DUNS) Number. If you do not have a DUNS number, you may provide a copy of your business license or registration.
- Submit proof of an active Worker's Compensation Insurance Policy (certificate or information letter).
- Be able to provide full-time (min. 32 hours/week), professional-level positions for interns and trainees (not to involve more than 20% clerical or basic work)
- Be able to provide continuous on-site supervision of interns and trainees
- Complete and sign a Host Employer Agreement form
- Create and sign a Training/Internship Placement Plan (DS-7002)
- Provide structured and guided training and not use this program for regular work purposes
- Have an English-language website that provides a description and verification of your company's business activities. If you do not have a website, you must submit professional marketing materials describing your business activities and a copy of your business registration and consent to a site visit by InterExchange.
- Offer training in a field InterExchange sponsors: Hospitality and Tourism; Information Media and Communications; Management, Business, Commerce and Finance; Public Administration and Law; and The Sciences, Engineering, Architecture, Mathematics, and Industrial Occupations.
- Supervisor must have a business or company email address (cannot be hotmail, gmail, etc.)

If your company has fewer than 25 employees and less than \$3 million in revenue, then we're required by the State Department to perform a site visit prior to approving you for the program. Further, InterExchange requires that any employer who does not have an active English-language website must consent to a site visit. We charge a one-time \$250 fee for a site visit, but once you're accepted into the program, you'll never have a repeat charge from InterExchange.

To further ensure appropriate placement of interns and trainees, InterExchange also requires that employers in our program:

- Maintain a full-time employee to intern/trainee ratio of **at least** 5:1. You must have sufficient staff in place to run your business while also providing continuous on-site supervision and training for your interns and trainees.
- Not be a home-based business
- Consent to be visited during your intern/trainee's program by InterExchange staff upon request

▶ PROHIBITED EMPLOYER TYPES AND TRAINING LOCATIONS:

Not all employers are permitted to host interns/trainees through InterExchange Career Training USA. We cannot approve participants for sponsorship at the following locations:

- Arcades
- Bridal Companies
- Candy stores/mall kiosks/boardwalk booths and stands
- Convenience/grocery stores or superettes/mini-markets
- Customer services/phone operators
- Fast food restaurants
- Fitness studios/personal training/coaching
- Gas stations or toll plazas
- Motels
- Pool management companies
- Schools and other instructional facilities
- Spas/salons/dog grooming companies
- Staffing agencies

Further, we cannot approve any positions that require or involve child care or elder care, or in clinical or any other kind of work that involves patient care or contact, including any work that would require trainees or interns to provide therapy, medication, or other clinical or medical care (e.g., sports or physical therapy, psychological counseling, nursing, dentistry, veterinary medicine, social work, speech therapy, or early childhood education).

Hospitality Guidelines

InterExchange also does not permit business-related (finance, marketing, etc.) programs in hotels, resorts, inns, or restaurants. Anyone wishing to work in hospitality or restaurant management positions must have education and/or experience in the field. In addition, all programs in hospitality or restaurant management are limited to 12 months, regardless of whether you are an intern or trainee.

All other employers and training plans will be considered on a case-by-case basis. If you are uncertain as to whether your place of business is appropriate for a J-1 Intern or Trainee program, please contact us at 1-212-924-0446 or via email at training@interexchange.org

Please be advised that you will be required to complete interim (if program is 6 months or longer) and final (all programs) evaluations to complete the J-1 visa program as per program regulations.

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Employer Checklist & Instructions

Please complete the following documents for each Intern/Trainee and provide them to your Intern/Trainee to submit with the program application. Be sure to complete all sections and pages and provide signatures where requested to allow for the quickest processing time.

▶ EMPLOYER CHECKLIST

- Review employer eligibility requirements at <http://www.interexchange.org/ct-employer-requirements>
- Conduct documented interview with prospective intern/trainee in person or via webcam/telephone
- Complete DS-7002 Training/Internship Placement Plan
 - All sections must be completed and typed in the PDF document within the space provided
 - Include a copy of Page 2 of the DS-7002 for each phase (every 3-4 months) of the internship or training program (see instructions below)
- Complete and sign the Host Employer Agreement Form
 - Federal Employer Identification Number (FEIN)
 - Dun & Bradstreet number (DUNS) or a copy of your business registration (To get a DUNS#, visit www.dnb.com)
 - Full-time employee to intern ratio of at least 5:1
 - English-language company website address (If you do not have a website, please attach professionally-produced company brochures/marketing materials)
- Workers' Compensation Insurance. Submit a copy of the certificate or binder letter, which must include the following information:
 - Company Name
 - Address of the internship/training location
 - Policy Number
 - Dates of Coverage (Expired certificates will not be accepted)
- Site Visit (Please see Host Employer Requirements page to determine if your company will need a site visit)
If a visit is required: A site visit representative will schedule the visit with you at a mutually convenient time. The visit takes approximately 30 minutes. If there is no representative in your area, we will recruit a new representative—this may require additional time before we can schedule a visit. A one-time fee of \$250 is charged to employers for the site visit.
- Employment Verification: Please note that you will be contacted via email by an Interexchange Career Training USA representative to confirm that you have offered the applicant an internship/training position. To facilitate application review, please respond promptly.

▶ EMPLOYER INSTRUCTIONS FOR COMPLETING THE DS-7002

1. Participant Information: Select either Trainee or Intern (*Student Intern is not a category offered through InterExchange*)
2. Site of Activity Information: Provide the contact information for the exact location of the internship/training program and the participant's direct supervisor's name and contact information.
3. Contract Agreement: The participant's direct supervisor must complete and sign the training plan and submit the document to the participant to sign as well. InterExchange is the sponsor and we will complete the sponsor sections.
4. Training/Internship Placement Plan: The plan must include separate phases and a copy of Page 2 of the DS-7002 must be provided for each phase (for every 3-4 months of the program). Hospitality programs must also include departmental rotations.
 - Field of Training/Internship: General field, e.g. "Business Management" or "Engineering".
 - Name of Phase: Each phase should have a different name, based upon the department or the specific role/objective/focus for that phase.
 - Brief Description of Role: Explanation of the role the participant will have and how he or she will contribute during this phase.
 - Specific Tasks & Activities or Chronology or Syllabus of Training: An outline of the specific tasks and responsibilities to be performed by the participant. Each phase should build upon the skills, tasks, and responsibilities gained in the previous phase(s).
 - Specific Goals and Objectives: The goal or focus of this phase.
 - Knowledge, Skills, or Techniques to be Imparted: An explanation of the anticipated learning outcomes and what will be highlighted and developed through this phase.
 - Method of Evaluation or Supervision: Explanation of how the participant will be evaluated and supervised. Evaluation can be done through in-person meetings, journaling, written reviews, etc

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Host Employer Agreement Form

Intern/Trainee Full Name:		
Company Name:	Parent Company Name (If Applicable):	Company Web Address:
Supervisor's Full Name:	Supervisor's Email:	Supervisor's Phone:

Please indicate the format used to interview the Intern or Trainee:

- Telephone
 Video Conference/Web Cam
 In-person
 Other: _____
 Date of Interview: _____
 Conducted by: _____
 Was the interview formally documented Yes No

Training Site:

Exact location intern/trainee will be placed for program duration
 Street Address: _____
 City: _____
 State: _____ Zip: _____
 Phone Number: _____

Local Housing and Transportation

Estimated monthly cost of room and board in area where trainee/intern is placed: \$ _____/month
 Will your company provide housing for the Intern/Trainee? Yes No
 If yes, cost per month to intern/trainee: \$ _____
 Do you recommend an automobile purchase? Yes No
 Is public transportation available for the intern/trainee's commute to the training site? Yes No
 If yes, estimated transportation expenses: \$ _____/month

Company Information:

Year Registered/Incorporated: _____
 Is this an international company? Yes No
 If Yes, where are your headquarters located? _____
 Federal Employer Identification Number (FEIN): _____
 Dun & Bradstreet (DUNS) Number: _____
Attach a copy of your business registration if you do not have a DUNS number
 Total Annual Revenue:
 Less than \$999,999 \$3,000,000 to \$4,999,999
 \$1,000,000 to \$2,999,999 \$5,000,000 or more
 Workers' Compensation Insurance Provider: _____
 Worker's Compensation Insurance Policy Number: _____
(Please also include copy of certificate or binder letter)

Company Size and Business Operations:

Total number of employees at all company locations: _____
 Total number of full-time, permanent, on-site employees at training/intern location (excludes interns, temps, independent contractors): _____
 Total number of full-time employees to be involved in the training and/or supervision of the intern/trainee: _____
 Total number of J-1 interns/trainees at the training location (from all visa sponsors): _____
 Is this a home-based business? Yes No
 Is this a staffing or employment agency? Yes No
 Is this a government office? Yes No
 Will your intern/trainee be involved in outside sales or work at client offices/locations? Yes No
 If yes, will they do so independently? Yes No
 Will your intern/trainee's program include more than 20% clerical work?
 Yes No

The undersigned Host Employer agrees to the following terms and conditions:

- I agree to adhere to the goals, objectives, government regulations and sponsor guidelines of the J-1 Internship/Training Exchange Visitor Program (22 CFR Part 62.22).
- I attest that the relationship between the Host Employer and Intern/Trainee will comply with all Federal, State, and Local laws regarding employment and occupational health and safety.
- I understand that placements for Interns are up to 12 months maximum and placements for Trainees are up to 18 months maximum or 12 months maximum for Hospitality and Tourism. For Hospitality placements lasting six months or longer I understand that at least three departmental or functional rotations are required.
- I understand that InterExchange is the government designated sponsor of the Internship/Training J-1 Visa program and the sponsor may at any time withdraw sponsorship from any participant in the event of non-compliance of the program regulations (22 CFR Part 62.22) or deviation from the Training/ Internship Placement Plan (US Government Form DS-7002).
- I agree to respond to all communication requests from the sponsor in a timely manner and will notify the sponsor immediately if the training plan changes or is not being followed, if the participant leaves his/ her position or suffers any medical, psychological, or criminal adverse effect.
- I understand that I must inform the sponsor if the Intern/Trainee quits or is terminated no more than 10 days after the event.
- I affirm that my company is not a staffing or employment agency or a home-based business.
- I affirm that my company has sufficient resources, plant, equipment and trained personnel available to provide structured and guided work-based experience according to the individualized Training/Internship Placement Plan (US Government Form DS-7002).
- I certify the position offered to the Intern/Trainee is fulltime (minimum 32 hours per week), does not involve more than 20 percent clerical work and is not unskilled or casual labor. I also certify the position is in no way related to child, patient or elder care, clinical or medical work, psychological counseling or social work, nursing, dentistry or veterinary work, speech therapy or early childhood education.
- I understand that the Intern/Trainee J-1 Visa program is not intended to be a substitute for ordinary work purposes, nor is it intended under any circumstance to displace American workers, or be a conduit to permanent work and residency in the USA.
- I attest that the position offered to the Intern/Trainee exists solely to achieve the tailored and specific objectives outlined in the Training/Internship Placement Plan (US Government Form DS-7002) through structured and guided activities.
- I attest that each Intern/Trainee placed with my company will receive continuous on-site supervision and mentoring by experienced and knowledgeable staff, and that the immediate supervisor will submit mandatory placement evaluations in a timely manner (for placements longer than six months both a midpoint and final evaluation).
- I agree to allow the sponsor or an agent designated by the sponsor access to the training location to conduct a site visit in compliance with program regulations.
- I understand that the sponsor cannot guarantee visa approval and therefore I agree to the refund policy as outlined within the Career Training USA Application once the original US Government Form DS-2019 has been returned to the sponsor.
- Per IRS Employer Tax Guide and Publication 515, I understand that participants on a J-1 Visa are considered non-resident aliens who are not subject to Social Security (FICA), Medicare, or federal unemployment (FUTA) withholding taxes. I agree to consult a tax professional regarding state unemployment tax exemptions within my state.
- I understand and agree that the sponsor cannot be held liable for the performance of the participant, nor for any civil or criminal liability incurred by the participant (including defense costs).
- I will indemnify and hold the sponsor harmless against any claims, liability, damages or costs incurred by reason of any act, error or omission of the Host Employer or its agents.
- I agree that any controversy, dispute or claim arising out of or in connection with this agreement, the relationship of the parties, or its interpretation, performance or nonperformance, or any breach thereof shall be determined solely in arbitration conducted in New York City in accordance with the then existing rules of the American Arbitration Association.

PRINTED NAME

SIGNATURE

TITLE

DATE (MM/DD/YYYY)