

# Cooperator Request Form

Please note that InterExchange only works with bone fide business entities appropriately licensed to conduct program services in their jurisdictions.

InterExchange collects confidential information about your company solely for the purpose of evaluating your ability to provide services as an international cooperator for our J-1 Visa and Working Abroad programs. InterExchange takes reasonable precautions to safeguard your confidential information, but we cannot make guarantees. Nor can we protect the information from lawfully required disclosure to the U.S. Department of State or any governmental authorities with jurisdiction over InterExchange.

## ▶ PROGRAMS OF INTEREST

Please indicate the programs for which you would like to cooperate with InterExchange, along with a realistic estimate of yearly participants.

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Au Pair USA</b> (Live-in child care for U.S. host families)<br>Estimated Number of Annual Participants: _____   | <input type="checkbox"/> <b>Work &amp; Travel USA</b> (Short-term seasonal J-1 Visa jobs)<br>Estimated Number of Annual Participants: _____   |
| <input type="checkbox"/> <b>Camp USA</b> (Summer camp counselors and support staff)<br>Estimated Number of Annual Participants: _____       | <input type="checkbox"/> <b>Working Abroad</b> (Programs for U.S. citizens: work, au pair, English teaching and volunteer abroad in your country)<br>Estimated Number of Annual Participants: _____ |
| <input type="checkbox"/> <b>Career Training USA</b> (Internships & Professional Training)<br>Estimated Number of Annual Participants: _____ |   |

## ▶ CONTACT INFORMATION *Please complete all fields.*

**Name of Organization:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ | **Title:** \_\_\_\_\_

**Director:** \_\_\_\_\_

**Mailing Address (No P.O. Boxes):** \_\_\_\_\_

STREET ADDRESS

CITY \_\_\_\_\_ | POSTAL CODE \_\_\_\_\_ | COUNTRY \_\_\_\_\_

**Telephone Country Code:** \_\_\_\_\_ | **Telephone:** \_\_\_\_\_ | **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_ | **Web Address:** \_\_\_\_\_

**Skype:** \_\_\_\_\_ | **Facebook:** \_\_\_\_\_ | **Twitter:** \_\_\_\_\_

## ▶ ABOUT YOUR COMPANY

LLC       Corporation       Not-for-profit       Other \_\_\_\_\_

Date Company Founded: \_\_\_\_\_ Are you legally registered?     Yes     No

How many employees does your company have this year?    Full Time \_\_\_\_\_    Part Time \_\_\_\_\_    Total Last Year? \_\_\_\_\_

What was your total revenue last year? \$ \_\_\_\_\_ USD

Has your company ever existed under a different name?     Yes     No

If yes, please explain the reason for the name change and provide copies of documentation that certify this name change.

Has your company ever filed bankruptcy?  Yes  No

If yes, please explain and provide date of filing:

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Has your company ever experienced a lawsuit?  Yes  No

If yes, nature of the case, dates and verdict:

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Is your company a member of any professional trade associations (i.e. WYSE, EAIE, IAPA)?  Yes  No

If so, which one(s)?

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Where do you maintain offices? If multiple countries, please list.

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Please provide the following:

Name(s) of owners:

Country(ies) of residence:

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Name of Managing Director: \_\_\_\_\_

Is there a Board of Directors?  Yes  No

How Many Board Members? \_\_\_\_\_

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Do you conduct criminal background checks on employees?  Yes  No

How else do you verify the character of your employees?

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What countries are you currently sending participants to?

Where and how do you recruit your applicants?

Have any of your employees or the participants you've worked with ever been found guilty of abusing or overstaying their visas?

Yes  No

If yes, please explain.

Is your office closed during certain periods of the year?  Yes  No

If yes, when?

How do you manage emergency situations during office closings?

Is there a period during the year when it is more difficult for your office to recruit applicants?  Yes  No

If yes, when?

What are the official university-designated semester/quarter dates for students to participate in the program (e.g., Summer, Winter, Holiday, etc.?)

Name of Designated Semester/Quarter	Start Date (MM/DD)	End Date (MM/DD)

How many total participants do you anticipate sending to the United States in the next calendar year? \_\_\_\_\_

Does your company have an established relationship with the U.S. Embassy in your country?  Yes  No

Explain:

How did you learn about InterExchange?

What J-1 Visa sponsors do you currently work with or have you worked with in the past? Please indicate on what program, through which sponsor organization and how many participants you have sent to the U.S. each year?

Sponsor Organization	From:	To:	Which Program(s)?	Participants Per Year
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please add any additional comments or questions:

Third parties with whom InterExchange contracts to assist with recruiting, selecting, screening, orienting or placing foreign nationals must enter into a written agreement with InterExchange outlining the full relationship between the parties on all matters involving the Exchange Visitor Program. A review of submitted information can take up to ten business days. InterExchange will contact any organization for which we believe there exists a realistic opportunity for a mutually satisfactory cooperation. *Note:* Each program determines its own need for representation and recruitment. Cooperation with one InterExchange program does not imply cooperation with all programs.

All potential International Cooperators must upon request be willing to furnish:

COMPANY STAMP:

1. Proof of business incorporation and operating license
2. Notarized statement from bank ensuring credit-worthiness of business
3. Three references from current business associates or partner organizations
4. A Dun & Bradstreet number, obtained online at [www.dnb.com](http://www.dnb.com)

Signature: \_\_\_\_\_

Name, Title: \_\_\_\_\_

Date: \_\_\_\_\_  
MM/DD/YYYY