



H-2B Work USA Employment Agreement

Instructions: For Self-Arranged Participants: The following section must be completed and signed by the Employer. This form must be signed by the Participant and submitted to the International Cooperator with the Participant's application to the program. **For InterExchange-Arranged Participants:** The following section must be completed and signed by the Employer. This form must then be signed by the Participant and submitted to the International Cooperator within 5 days, and prior to the H-2B Petition being filed with the USCIS.

_____ from _____
(Name of Participant) (Participant's Country)

has been offered employment with, _____
(Name of Company)

Address: _____
Street City State zip

Contact Person (and title): _____ Phone: _____

Fax: _____ E-mail: _____ Website: _____

Dates of Employment (*month/day/year*) Start ____/____/____ End: ____/____/____

Job Title: _____ Total hours per week *basic:* ____ *overtime:* ____

Work schedule per day: *am* to *pm* Rate of pay *basic:* \$ ____ *per* ____ *overtime:* \$ ____ *per hour*

Housing cost: \$ ____ *per* ____ Housing deposit (if any): \$ ____ Cost of meals (if available): \$ ____ *per* ____

Job Description:

Uniform/Dress Code Requirements:

Housing Information:

Name of Employer and Title (Print) Signature Date (Month/Day/Year)

Employee: In accepting the position above, I agree to only work for the Company named above and for the exact employment dates listed above, as required by the H-2B Visa. I understand that either I or the above Company can terminate the employment relationship at any time with prior notice to the Employer and InterExchange for any reasons not prohibited by law. Should I no longer be employed by the above Company, I will leave the United States immediately, as required by the H-2B Visa.

Name of Employee (Print) Signature Date (Month/Day/Year)