

# AMERICAN AUSTRALIAN ASSOCIATION

Job Offer: J-1 Exchange Visitor Visa / Evidence of Support



EMPLOYEE DETAILS			
This job offer is for: <i>(name of employee)</i>			
EMPLOYMENT DETAILS			
Company name:			
Address:			
City:	State:	ZIP:	
Website:		EIN:	
Work site address <i>(if different from above)</i>			
Supervisor /Manager name:		Phone:	
Email:		Fax:	
Employee job title:			
Brief description of duties:			
Job Start Date:	If flexible, indicate the period:		
Job End Date:	If flexible, indicate the period:		
Minimum pay rate per hour:	Tips available? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Hours per week:	Overtime available? <input type="checkbox"/> Yes <input type="checkbox"/> No	Overtime rate:	
Is there any training period in which hours and wage may differ from the hours/wages indicated above? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If YES: Duration of training period:	Number of hours:	Pay rate:	
EMPLOYER'S AGREEMENT			
By signing, it is agreed that the information provided on this job offer form is accurate. The Employee will receive compensation equal to that offered to his/her American counterpart.			
Name of Company Representative:		Position Title:	
Signature:		Date: ___ / ___ / ___ mm dd yyyy	
EMPLOYEE'S STATEMENT OF ACCEPTANCE			
I have read thoroughly this employment offer and accept the position with all the conditions offered herein. I fully understand that by signing this employment offer I am making a commitment to the employer in acceptance of the terms and conditions stated. I have not signed any other agreement or document that states any other conditions or contradicts what is stated above. I confirm that I can communicate effectively in English.			
I understand and agree to the following: I am only eligible to work during the dates on my DS-2019 Form; the Employer can terminate the employment offer at any time without prior notice and for reasons not prohibited by law; my position, duties and responsibilities may vary during the period of employment to be able to satisfy the needs of the employer; I am not allowed to change jobs or job sites without prior written consent of the American Australian Association (AAA); if I choose to or am unable to arrive to work on the dates above, I might not have a position available with the Employer. The Employer is requested by AAA to report if I do not show up at work, if I leave early, or if I am terminated from employment.			
Employee Name:	Signature:	Date: ___ / ___ / ___ mm dd yyyy	