



Summer Work & Travel Employer Request for Participation

Thank you for your interest in working with the International YMCA... if you have any questions while filling out this form, feel free to call or email Chad at 1-888-477-9622 X 4328 or email chiu@ymcanyc.org

Company Information

Company
Address
City State
Telephone Fax
URL
EIN

Company Contact

Name
Title
Direct Telephone
Cell
E-mail

Workplace Location

If the SWT participant's workplace is at a different location, please provide information here.
Address
City State ZIP
Telephone Fax
Contact Name
Title
Telephone

Company Activities & Background

Describe the company's activities and background. Provide information about number of employees, company size, etc. Please attach promotional materials or additional sheets as needed.

Accommodations

Accommodation provided? Y N
House Apartment Other
Rate Per week: Deposit required
Utilities included? Y N
Shared with others:
Male Only Females Only Co-ed
Furnished? Y N
If accommodation not provided, describe assistance provided.

Please note that providing housing is preferred, but not required of our employers.

Transportation

Is transportation to the work provided?
Y N Not applicable; On-site
If transportation not provided, to get to work participant must:
Is public transportation available? Y N
Cars available to participants? Y N
Bicycles available to participants? Y N

Describe any other transportation options, issues or challenges participants may have.

Experience with International Staff

Years company has employed international staff:
Has company ever employed international staff sponsored by the YMCA? Y N Not Sure
Describe the type of supervision and support provided

Describe cultural and free-time activities available to international staff in the surrounding community

Describe how employing international staff will contribute to the company's mission and development

General Participant Requests/Information

Male Female Total

Driver's license Y N
required?

Prefer participants from (list countries):

Other requirements (English, experience, etc.)

Other certifications/skills/experience required?

Available Position 1

Position Title

Responsibilities:

Hours/Week

Rate

Overtime hrs/wk

Rate

End of season bonus

Y N

Amount

Preferred start date

Latest start date

Preferred end date

Earliest end date

Available Position 2

Position Title

Responsibilities:

Hours/Week

Rate

Overtime hrs/wk

Rate

End of season bonus

Y N

Amount

Preferred start date

Latest start date

Preferred end date

Earliest end date

Professional Affiliations

List any professional affiliations or memberships your company has, such as trade groups of chambers of commerce.

References

Name

Title

Company

Relationship

Telephone

E-mail

Name

Title

Company

Relationship

Telephone

E-mail

Attach any materials you may distribute to international staff, training documents or other helpful information. Positions, pay rates, employment dates and other employment details are for informational purposes only. Actual Information will appear in a written agreement/contract between the employer and the Summer Work & Travel participant. If you have any questions, please feel free to give us an email or call... thank you for your time!!

Completed by _____ Telephone _____ Date _____

Mail this form to: International YMCA, Attn: IES/SWT, 5 West 63rd Street, 2nd Floor, New York, NY 10023;
or fax to: 212-727-8814 attn: CHAD or e-mail to: chiu@ymcanyc.org