



# SUMMER WORK & TRAVEL PROGRAM

# PARTICIPANT APPLICATION PACKET

**International YMCA**

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strong families,  
strong communities.

Please type or print in BLOCK letters as it appears in your passport.

<b>Last Name:</b> _____	<b>Date of Birth: Month:</b> _____ / <b>Day:</b> _____ / <b>Year:</b> _____
<b>First Name:</b> _____	<b>City of Birth:</b> _____
<b>Middle Name:</b> _____	<b>Country of Birth:</b> _____
<b>Permanent Address:</b> _____	<b>Country of Citizenship:</b> _____
_____	<b>Country of Legal Residence:</b> _____
<b>City:</b> _____ <b>Country:</b> _____	<b>Gender:</b> <b>Female</b> _____ <b>Male</b> _____
<b>Postal Code:</b> _____	
<b>Telephone:</b> _____ <small>(Country Code, City Code, #)</small>	<b>Scheduled Arrival Date in U.S.</b> _____ <small>(month/date/year)</small>
<b>E-Mail:</b> _____ <b>(Used for important communication during program)</b>	<b>Scheduled Departure Date</b> _____ <small>(month/date/year)</small>

Are you currently enrolled as a student? Yes \_\_\_\_\_ No \_\_\_\_\_      **\*Attach proof of enrollment to application**

What is your major field of study? \_\_\_\_\_ When will you graduate? \_\_\_\_\_

Are you a (circle one):      **Graduate Student**      **Undergraduate Student**

Have you entered the US on a J-1 visa before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list: Program Year(s)      Program Sponsor(s)      Program Category  
(summer work/travel, high school, etc.)

Have you ever been convicted of a crime or of child abuse?      Yes \_\_\_\_\_      No \_\_\_\_\_

If yes, explain \_\_\_\_\_

\_\_\_\_\_

**Employer Name** \_\_\_\_\_ **Your Job title:** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Supervisor** \_\_\_\_\_ **Telephone** \_\_\_\_\_ **E-mail** \_\_\_\_\_  
(area code, #)

Do you have any chronic medical conditions or allergies? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, explain: \_\_\_\_\_  
 \_\_\_\_\_

**Educational Background**

Name of School	Location (City)	Major Field of Study	Dates Attended (From—To)	Date Degree Earned

**Work Experience**

Company Name	Position	Dates Worked (From-To)	Location (City)

**Volunteer Experience**

Company/Agency Name	Position	Dates Volunteered (From-To)	Location (City)

**Emergency Contact Information**

Emergency Contact Name _____	Relationship to applicant _____
Telephone _____ <small>(Country Code, City Code, #)</small>	Mobile Telephone _____
Address _____ _____ _____	E-Mail _____

**Application Agreement**

I certify that I meet program eligibility criteria and have truthfully completed this application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR RECRUITER USE ONLY:**

Participant Application (2 pgs)  
 Participation Agreement (1 pg)  
 Proof of Student Status-POSS (1 pg)  
 English Assessment (1 pg)  
 Interview Report (1 pg)  
 Reference Forms (1 pg)  
 Budget Sheet (1 pg)  
 Employment Offer Form (EOF)  
 Circle one: *Is this employer your contact?* YES NO  
 Clear photocopy of Passport

**PLEASE KEEP PAGES IN THIS ORDER**

**Recruiter Signature/Date:** \_\_\_\_\_



# SUMMER WORK & TRAVEL PROGRAM

# PARTICIPATION AGREEMENT

## International YMCA

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### Participant Terms and Conditions

#### Application

1. The YMCA will not process applications or issue forms DS-2019 to participants that submit fraudulent application documents or Employer Offer Agreement Forms, regardless of the circumstances.
2. The YMCA will not process applications or issue forms DS-2019 to participants that pay a fee to any organization or person, not previously approved by the YMCA, for finding a job in the U.S.

#### General

3. Participants must read the International YMCA Summer Work & Travel Program participant manual *in full*, follow all program rules, and keep a copy for reference while in the U.S.
4. Participants must abide by the terms of the Exchange Visitor visa: to work only at the site approved by the YMCA and to return home before the expiration date of the J-1 program.
5. Participants must attend a pre-departure orientation provided by the YMCA and/or a representative of the YMCA, as well as complete the YMCA on-line orientation (web site download) as needed.
6. Participants must maintain sickness and accident insurance for their entire stay in the U.S., which meets U.S. government regulations.
7. Participants are responsible for all personal or incidental expenses before, during, and after the work commitment.
8. The YMCA cannot intervene for participants that have legal difficulties while under YMCA sponsorship.
9. Participants must complete a program evaluation (web site download) prior to returning to their home country.
10. Participants may not remain in the U.S. longer than allowed according to form I-94 or the date when university classes resume, whichever comes first.
11. Participants must follow any additional program rules of the recruiter in their home country.

#### Arrival in the U.S.

12. Participants must inform the YMCA of their correct U.S. residential addresses within 5 days of arrival in the U.S. or within 30 days of the program start date on form DS-2019, whichever is earlier. Participants must inform the YMCA of any subsequent changes of address within 5 days. This should be done via our website ([www.internationalymca.org](http://www.internationalymca.org)).
13. Participants must apply for a Social Security number upon arrival in the U.S. or bring a U.S. Social Security card with them if one has already been issued.

#### Employment

14. Participants must accept the placement arrangements made by their employers; carry out their responsibilities to the best of their abilities, adhere to the policies and regulations of the employers, and the local, state and federal laws of the United States of America.
15. Participants must work until the date listed in the employer offer agreement form.
16. Participants may not change jobs (with very few exceptions) or accept second jobs without first: a) requesting and receiving approval from their primary employer; b) contacting the YMCA and receiving written permission to change jobs; c) submitting a new Employer Offer Agreement Form, signed by both the employer and participant; and c) receiving written confirmation that the YMCA has screened and approved the new employer.

#### Program Termination

17. The YMCA will terminate sponsorship of participants' programs for violation of program rules in the following cases:
  - ◆ Submitting fraudulent application information (no. 1);
  - ◆ Failure to maintain sickness and accident insurance (no. 6);
  - ◆ Conviction of a crime (no. 8);
  - ◆ Failure to return to home country as required (no. 10);
  - ◆ Failure to follow home country recruiter rules (no 11);
  - ◆ Failure to report U.S. address on time (no. 12);
  - ◆ Firing by an employer for bad behavior including, but not limited to, theft, drug use, failure to report to work, tardiness, poor performance, or breaking other company rules (nos. 14 and 15); and
  - ◆ Failure to follow procedures for changing jobs or taking second jobs (no. 16).
18. Any participant whose program sponsorship is terminated will be required to return to his/her home country within 72 hours and will be informed in writing via email.

*I have read and agree to the above terms and conditions. I also agree to retain a copy of this agreement for reference while I am in the U.S.*

**Print Name:**

**Signature:**

**Date:**



# SUMMER WORK & TRAVEL PROGRAM

# PROOF OF STUDENT STATUS (POSS)

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**Student's Name:** \_\_\_\_\_

**Name and Address of Post-Secondary Institution:**

**Major Field of Study:**

**Number of years of university study student will have completed at time of participation in the YMCA Work & Travel Program:**

**Month and year student complete studies:**

**Dates of break from college or university:**

**From:** \_\_\_\_\_ (month) \_\_\_\_\_ (day) \_\_\_\_\_ (year)

**To:** \_\_\_\_\_ (month) \_\_\_\_\_ (day) \_\_\_\_\_ (year)

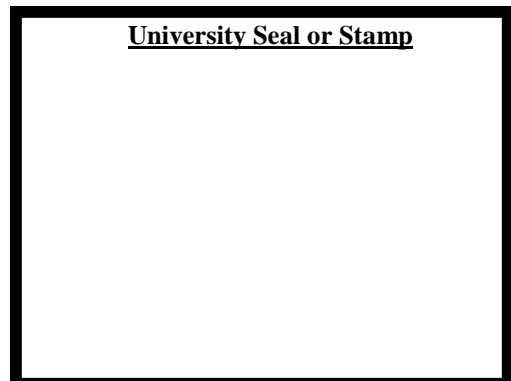
## To be Completed by University Official *(please print)*

I certify that: Mr./Ms. \_\_\_\_\_ is a full-time enrolled matriculating student at our institution; that the above information is correct; and that he/she will continue his/her studies upon completion of the YMCA Summer Work & Travel Program.

**Name/Title:** \_\_\_\_\_

**Official's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_





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# ENGLISH ASSESSMENT

**Instructions:** This English Assessment Form should be filled out by a certified teacher of English, the interviewer or by the direct supervisor of the participant at the host site. The information will be used to determine the ability of the applicant to benefit from participation in a YMCA sponsored Summer Work & Travel program. Please do not over-estimate the ability of the applicant to speak and comprehend English. This could lead to the applicant being placed in a program beyond his or her level of ability and comfort.

**Applicant's Name:** \_\_\_\_\_

### English Rating:

The Applicant's English *Speaking* Ability is:

\_\_\_\_\_ **Native Speaker**

\_\_\_\_\_ **Excellent**

\_\_\_\_\_ **Good**

\_\_\_\_\_ **Fair**

The Applicant's English *Comprehension* is:

\_\_\_\_\_ **Native Speaker**

\_\_\_\_\_ **Excellent**

\_\_\_\_\_ **Good**

\_\_\_\_\_ **Fair**

### Definition of Ratings:

**Native Speaker**—English is the applicant's first language. It is the predominate language of the home country.

**Excellent**—Thinks in English. Comprehends at normal speaking speed. No noticeable grammatical errors. Is accustomed to speaking with native English speakers.

**Good**—Able to speak easily with some grammatical errors. Comprehends most conversation the first time heard at normal speaking speed. May have to ask native English speakers to explain some terms.

**Fair**—Able to speak with limited vocabulary. Comprehends simple, slowly spoken conversation. Will have to ask native English speakers to slow down.

**Explain why you believe the applicant should be given the above rating:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name of Assessor:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**University/Company/Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone :** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



# SUMMER WORK & TRAVEL PROGRAM

# INTERVIEW REPORT

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Applicant's Name: \_\_\_\_\_

1) Why do you believe the applicant wants to participate in the program?.

\_\_\_\_\_  
\_\_\_\_\_

2) Rate the applicant on these qualities:	Excellent	Good	Fair	Poor
Adaptability to new situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Problem Solve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity/Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates Good Judgment Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation with Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Initiate Conversation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of Humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Initiate Friendships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheerfulness/Enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3) Explain why applicant would or would not be a good candidate for the program. Provide examples.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Overall Rating:                      Excellent                      Good                      Fair                      Poor  
(circle one)

Name of Interviewer \_\_\_\_\_ Position \_\_\_\_\_

University/Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



# SUMMER WORK & TRAVEL PROGRAM

# REFERENCE FORM

**International YMCA**

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**Applicant's Name:** \_\_\_\_\_

1) Please rate the applicant on the following qualities:

	Excellent	Good	Fair	Poor
Adaptability to new cultures/situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Problem Solve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity/Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates Good Judgment Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation with Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of Humor/Cheerfulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Initiate Friendships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patience & Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2) Describe the applicant's ability to relate to people of different cultures, nationalities, ages, genders, and social strata:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) The YMCA Summer Work and Travel Program offers outstanding university students the opportunity to gain understanding and appreciation of the United States. The program encourages students to spend up to four months working and traveling, meeting people and experiencing first hand the diversity, complexity and energy of the United States. Please describe why you believe this applicant would benefit from this program:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Overall Rating:</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*\*\*You may attach additional pages/documentation as necessary\*\**

Evaluator's Name: \_\_\_\_\_ Title: \_\_\_\_\_

University /Company/Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_ Website: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

# YMCA Budget Sheet for Planning Income and Expenses

(To be completed by Participant)

- 1) To make sure you understand your financial situation while in the U.S., we request that you complete this budget sheet, sign it at the bottom, and attach it to your application form. Please also keep a copy for your records.
- 2) The YMCA International Student Work and Travel Program *is not a moneymaking program*. The goal of the J-1 visa is to foster educational exchange. This program provides you with the opportunity to earn enough money to support yourself while you are living in the United States, as well as learning, and traveling at the end of your program.
- 3) Upon arrival to the U.S. you should have no less than \$600 for initial living expenses until you receive your first paycheck. Depending on your job type/location, living arrangement, and transportation requirements, you may need even more.
- 4) The YMCA, the recruiter, and the host site will not forward or advance any money to you.
- 5) It is *your responsibility to properly budget your finances* for the duration of your time in the United States as a J-1 Exchange Visitor.

## EXPECTED INCOME AND PERSONAL RESOURCES

**APPROXIMATE TOTAL GROSS INCOME:** \$ \_\_\_\_\_

Total gross income equals total work weeks X the average work hours per week X your hourly rate.  
(Example: 12 weeks X 40 hours per week X US\$7 per hour = US\$3,360.)

**APPROXIMATE TOTAL NET INCOME:** \$ \_\_\_\_\_

Subtract 15% for payroll withholding tax from your total gross income. (Example: US\$3,360 X 0.85 = US\$2,856.)

**PERSONAL RESOURCES:** \$ \_\_\_\_\_

**TOTAL NET INCOME AND PERSONAL RESOURCES:** \$ \_\_\_\_\_

(Add total net income and personal resources.)

## EXPECTED EXPENSES

(Figure expenses for the total number of weeks you will be in the U.S.)

Fees paid to recruiter: \$ \_\_\_\_\_

Visa application fee: \$ \_\_\_\_\_

SEVIS fee: \$ \_\_\_\_\_

International airfare: \$ \_\_\_\_\_

Accommodations upon arrival in the U.S. (if necessary): \$ \_\_\_\_\_

Transportation to host site from port of entry: \$ \_\_\_\_\_

Security deposit for apartment/dormitory at host site: \$ \_\_\_\_\_

Apartment/dormitory rent: \$ \_\_\_\_\_

Transportation to/from work: \$ \_\_\_\_\_

Miscellaneous expenses not included in rent (sheets, towels, pots and pans, etc.): \$ \_\_\_\_\_

Food (Budget \$50-75 per week if you cook your own meals. Budget more if you eat out.): \$ \_\_\_\_\_

Entertainment (movies, museums, etc.): \$ \_\_\_\_\_

Personal/Other (telephone, stamps, etc.): \$ \_\_\_\_\_

**TOTAL EXPECTED EXPENSES** \$ \_\_\_\_\_

**REMAINING MONEY FOR TRAVEL** \$ \_\_\_\_\_

(Subtract total expected expenses from total net income and personal resources.)

*I understand that the above the financial data is estimate made by me. This form is meant to be a tool to help participants anticipate and budget expenses. Actual income and expenses may vary.*

**Participant Name:** \_\_\_\_\_

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

**Date:** \_\_\_\_\_



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# EMPLOYMENT OFFER FORM (EOF)

Employer completes section 1. Participant completes section 2.

**Please type or print neatly!!**

## Participant's Name:

### 1. Employer Section

**Company Information**

<b>Company Name:</b>	<b>DBA:</b>
<b>Address:</b>	<b>Tax ID:</b>
<b>City, State, Zip Code:</b>	<b>Web Site:</b>
<b>Name of Supervisor:</b>	<b>Title:</b>
<b>Business Telephone:</b>	<b>Fax:</b>
<b>Mobile Telephone:</b>	<b>E-mail:</b>

**Job Information**

**Employment Site:**  
**Address, City, State, Zip Code:**

**Employed from:** \_\_\_\_\_ **to** \_\_\_\_\_ **Job Title:**  
(mm/dd/yyyy) (mm/dd/yyyy)

**Job duties:**

**Contact Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Wage per hour:** \_\_\_\_\_ **# of hours per week:** \_\_\_\_\_ **End of season bonus? Yes/No If yes, amount?** \_\_\_\_\_

**Housing Information**

**Accommodations provided? Yes/No**      **Cost of accommodations per month/week:** \_\_\_\_\_ **Amount of deposit:** \_\_\_\_\_

**Accommodations shared? Yes/No**      **Number of student per room:** \_\_\_\_\_ **Other fees/expenses (linens, utensils, etc.):** \_\_\_\_\_

**House/apartment owned by:** \_\_\_\_\_ **Relationship to company:** \_\_\_\_\_

If accommodations *not provided*, company will assist by:

**Is transportation to and from work provided? Yes/No**      If no, describe options: \_\_\_\_\_

**Signature**

I certify that I am an employee of the above named company and am authorized to complete this document. I certify that the participant named above has been offered a temporary position with our company, that compensation is at the prevailing wage, and that all information is true. I understand that YMCA Summer Work & Travel participants may begin working and may be paid for their work upon providing a receipt that they have applied for s SSN and that a SSN is not required to begin working or to be paid. I agree to notify the YMCA if the participant changes the employment site, is terminated, or leaves employment before the agreed upon date.

<b>Name:</b>	<b>Title:</b>	<b>Telephone:</b>
<b>Signature:</b>	<b>E-Mail:</b>	<b>Date form completed:</b>

### 2. Participant Section

**Signature**

I understand that this job is not firm and may be revoked for reasons sufficient to the Employer at any time before or after I start working. I agree to work no more than four months (120 days) in total. I understand that this job can be terminated at any time by myself (with two weeks notice provided to my supervisor) or by the Employer (for any legally permissible reason). I understand that my hours of work, duties and responsibilities may change at the sole discretion of the Employer in accordance with US law.

<b>Name:</b>	<b>E-mail:</b>
<b>Signature:</b>	<b>Date:</b>