

## Host Company Application

HOST COMPANY CONTACT INFORMATION (Required)			
Company name:		Company address:	
Company description:		Address of work/training site:	
Website:			
Primary contact name:		Title:	
Phone number:	Fax:	Email:	
Would you give us permission to use pictures/photos (from website/brochures) about your company for recruitment purposes?			Yes      No

POSITION OFFER 1			
Position title:		Number of participants requested:	
Program start date:		Program end date:	
Supervisor name:		Supervisor title:	
Supervisor phone:		Supervisor email:	
Typical work schedule:		Morning (6am-2pm)	Evening (2pm-10pm)      Other
If other work schedule, please specify:			
The company agrees to provide a minimum of 30 hours/week for the duration of the program?			Yes      No
The company agrees to provide a program length of 6 months?			Yes      No
Estimated wage:\$      AUD		Is uniform provided?      Yes      No	
Do you have any additional employee information/documents to include? <i>yes no (if yes, please attach)</i>			Yes      No

POSITION OFFER 2			
Position title:		Number of participants requested:	
Program start date:		Program end date:	
Supervisor name:		Supervisor title:	
Supervisor phone:		Supervisor email:	
Typical work schedule:		Morning (6am-2pm)	Evening (2pm-10pm)      Other
If other work schedule, please specify:			
The company agrees to provide a minimum of 30 hours/week for the duration of the program?			Yes      No
The company agrees to provide a program length of 6 months?			Yes      No
Estimated wage:\$      AUD		Is uniform provided?      Yes      No	
Do you have any additional employee information/documents to include? <i>(if yes, please attach)</i>			Yes      No



POSITION OFFER 3			
Position title:	Number of participants requested:		
Program start date:	Program end date:		
Supervisor name:	Supervisor title:		
Supervisor phone:	Supervisor email:		
Typical work schedule:	Morning (6am-2pm)	Evening (2pm-10pm)	Other
If other work schedule, please specify:			
The company agrees to provide a minimum of 30 hours/week for the duration of the program?	Yes	No	
The company agrees to provide a program length of 6 months?	Yes	No	
Estimated wage:\$	AUD	Is uniform provided?	Yes No
Do you have any additional employee information/documents to include? yes no (if yes, please attach)		Yes	No

## TERMS & CONDITIONS

### Welcome to the Program!

We hope that you will find this program to be a wonderful supplement to your regular workforce. The information you provide on this application will assist us in recruiting the right person for your needs and will also help set appropriate expectations for what you are expecting from the Participant during their time as your employee.

### Recruitment

Alliance Abroad International (AAG INTL) will use its best efforts to recruit the number and type of participants for the time period you indicated in your Host Company Application. AAG INTL will utilize time-tested recruiting methods for this process. However, both parties acknowledge that hiring employees is an imperfect science, and due to the nature of this program, AAG INTL can make no guarantees, express or implied, that AAG INTL will be able to fill your job positions with participants, or that AAG INTL will be able to find participants to work for the dates you requested.

### Insurance

All participants are encouraged to have basic medical coverage during their program.

### Support during the Program

AAG INTL will provide support for you and the participant before, during and after the program. We have 24/7 hour emergency lines.

### Arrival Process

You should receive advance notice of your participants' arrival from AAG INTL.

### Obligations of Employers

- You agree to provide participants at least the number of hours of paid employment per week as identified in this Company Application;
- You agree to pay those participants eligible for overtime worked in accordance with applicable state or federal law;
- You agree to pay participants at minimum the award wage.

### Employer Declaration

With the submission of this application, I acknowledge that I understand and agree with the purpose of this program. I understand that AAG INTL will do its best to provide participants to work for my company according to my needs but that it cannot guarantee the exact number of participants who will finally work for me (due to recruitment, visa denials, etc.). I agree to all of the Terms and Conditions listed here, and specifically to all of the Obligations of Employers listed above. I understand that if I am not complying with these obligations, I agree to indemnify and hold AAG INTL harmless from any and all damages that may result to AAG INTL or the participants from not abiding by these Terms and Conditions.

Host Company name:

Host Company Representative:

Host Company Representative Signature:

Date (mm/dd/yyyy):