

## Host Company Agreement: ASSE Aspire Intern and Trainee Program

This agreement is between ASSE International operating under the name ASSE Aspire or Aspire Worldwide (“ASSE Aspire”) and Host Company. By your signature below you agree to the terms and conditions stated in this letter and commit the company to full compliance with its obligations under the United States Department of State’s rules governing “J-1” visa holders completing training and/or internships in the United States.

Initial x\_\_\_\_1. I acknowledge that the information on the Host Company Verification form, Host Company Training Information forms, and the DS-7002 Training/Internship Placement Plans are true and correct and truly reflect the objectives of the trainee/intern.

Initial x\_\_\_\_2. I shall provide the trainee/intern with the tasks, activities and evaluation described in the Training/Internship Placement Plan.

Initial x\_\_\_\_3. I shall introduce the trainee/intern to these tasks and activities.

Initial x\_\_\_\_4. I shall provide adequate space, equipment, plant, and on-site supervision dedicated to the trainee/intern.

Initial x\_\_\_\_5. I understand that the trainee/internship program is not a means of recruiting long-term staff for my company and we, therefore, have no intent to employ any trainee/intern upon completion of the training/internship period and will not sponsor and/or petition for temporary or permanent work visas for any participants (i.e. H-1B) during the program.

Initial x\_\_\_\_6. I understand that the trainee/internship program is not a means to avoid hiring US workers for regular part-time or full-time employment with my company.

Initial x\_\_\_\_7. I also understand that the trainee/intern shall not be given the tasks and responsibilities that allow him/herto displace a part-time and/or full-time employee.

Initial x\_\_\_\_8. I shall comply with United States federal, state, and local labor and wage regulations for J- visa holders in the trainee/intern category.

Initial x\_\_\_\_9. I shall conduct an entry orientation for the trainee/intern and inform him/her of the company’s rules and policies at the beginning of the training/internship program.

Initial x\_\_\_\_10. I shall notify ASSE ASPIRE immediately and in writing of any issues regarding the trainee’s/intern’s performance, changes in the training/placement plan, or the trainee’s/intern’s successful completion of the program as described in the training/placement plan.

Initial x\_\_\_\_11. I shall inform ASSE ASPIRE if the Host Company’s contact information, including the address where the training/internship is taking place, changes at any time during the program.

Initial x\_\_\_\_12. I understand that any changes to the Training/Internship Placement Plan including change in training location, supervisor and/or change in rotations can only take place after the written approval from ASSE ASPIRE and that any significant change will require a new training plan to be made.

Initial x\_\_\_\_13. I understand that all training/intern programs must not be used as substitutes for ordinary employment or work purposes. The requirements in these regulations for trainees are designed to distinguish between bona fide training, which is permitted, and merely gaining additional work experience, which is not permitted. The requirements in these regulations for interns are designed to distinguish between a period of work-based learning in the intern’s academic field, which is permitted (and which requires a substantial academic framework in the participant’s field), and unskilled labor, which is not.

Initial x\_\_\_\_14. I am aware that our company must evaluate the trainee’s performance. I confirm that the company will complete and submit the Mid-point and Final Evaluation in a timely manner as they are required by ASSE ASPIRE. I also

confirm that I will upload to ASSE ASPIRE Database internal evaluations completed at the end of each training phase as stated on the Training Plan.

Initial x\_\_\_\_ 15. I shall promptly respond to every contact that ASSE ASPIRE makes with my company, or ensure there is a contact person available to coordinate with ASSE ASPIRE.

Initial x\_\_\_\_ 16. I understand that ASSE ASPIRE is the legal sponsor of the program and of the trainee/intern and not my company.

Initial x\_\_\_\_ 17. I understand that ASSE ASPIRE has the right to withdraw sponsorship from the trainee/intern if my company violates the policies set forth by ASSE ASPIRE.

Initial x\_\_\_\_ 18. I understand that the maximum program duration for trainee is 18 months and 12 months for intern. I shall not encourage the trainee/intern to stay in the United States beyond the time stated on the visa.

Initial x\_\_\_\_ 19. I understand that the trainee/intern is strictly prohibited from accepting any outside employment. Any such employment shall be reported to ASSE ASPIRE.

Initial x\_\_\_\_ 20. I am aware that the trainee/intern shall leave within 30 days of the program end date or the date of the withdrawal of sponsorship from ASSE and that the trainee/intern is not allowed to train during these 30 days.

Initial x\_\_\_\_ 21. I acknowledge that I have spoken with a representative from ASSE ASPIRE, and that I understand all of the regulations of the program.

I understand and agree to the above conditions and certify that the information contained on the attached ASSE ASPIRE Host Company Verification Form is true and correct. I understand that if I do not comply with the above program rules or if the information I have provided is not correct, to the best of my knowledge, ASSE ASPIRE has the right to withdraw its sponsorship for the trainee/intern.

In the event either party wishes to terminate this agreement, it must advise the other party in writing with minimum 60 days prior to termination date. By terminating this agreement, it in no way relieves the host company from its obligation under ASSE ASPIRE program rules to its program participants or the US Department of State Regulations.

Sincerely,

**ASSE INTERNATIONAL  
ASPIRE WORLDWIDE**



By: Fei Jiang, Responsible Officer

AGREED AND ACCEPTED:

\_\_\_\_\_  
HOST COMPANY NAME (Please Print)

\_\_\_\_\_  
Name of Signatory (Please Print)

\_\_\_\_\_  
Position in the Company

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### ASSE ASPIRE Trainee/Internship Program Host Company Verification

<b>PART 1</b>		Corporate or Parent Name (if applicable)	
Name of Company (DBA)			
Complete Address of Training Site (please include City, State and Zip Code)			
Year Registered/Incorporated	Telephone Number (include area code)	Fax Number (include area code)	
Company Website		Email Address	
Total number of employees in Company/organization (all US locations):		Number of J-1 trainees/interns in Company organization (all US locations):	
Total number of employees at training / intern job site:	Total number of J-1 trainees/interns at training/intern site:	Number of H-2B workers at training/intern site:	
Transportation available for the Trainee's commute to training site: <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you recommend an automobile purchase? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Employer provided (company car or shuttle) <input type="checkbox"/> Public Transportation <input type="checkbox"/> Walk <input type="checkbox"/> Other:		Estimated transportation expenses: \$	
Estimated monthly cost of room and board in area where trainee/intern is placed: \$		/month	
Company Description (please attach additional materials such as brochures, one page company summary)			Tax ID Number:
Do you carry a valid Workmen's Compensation Policy? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, will the coverage be maintained for any and all participants' program durations? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Please attach a copy of the Policy Summary.			
State in which Company registered/incorporated:			
List the number of all US locations:			
List the number of all US locations with J-1 Intern/Trainees on site:			
Type of Company			
<input type="checkbox"/> LLC <input type="checkbox"/> 'S' Corp <input type="checkbox"/> 'C' Corp <input type="checkbox"/> Other _____			
Total annual gross receipts or gross annual revenue (applicable to for-profit companies only):			
<b>PART 2</b>			
Do you have any full-time or part-time employees involved in teaching or responsible for childcare? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Will you have any trainees or interns involved in teaching or responsible for childcare? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you have any full-time or part-time employees involved with providing medical treatment to human or animal patients or having any contact with human or animal patients? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Will you have any trainees or interns involved with providing medical treatment to human or animal patients or having any contact with human or animal patients? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you have any full-time or part-time employees involved with clients in a medical, psychological or social services setting? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Will you have any trainees or interns involved with clients in a medical, psychological or social services setting? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is your Company in the business of hiring individuals for the purpose of supplying workers to other businesses, where the workers remain on your payroll and the other businesses pay you a fee? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Will you have any trainees or interns spending more than 20% of their time on clerical work? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If YES to any of the above Part 2 questions, please explain on an attached sheet, so we can assess whether ASSE ASPIRE can sponsor trainees and interns assigned to your company.			