

Host Company Agreement: ASSE Aspire Intern and Trainee Program

This agreement is between ASSE Aspire, Inc ("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 training/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 training/internship program is not a means to avoid hiring US workers for regular parttime 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/her to 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/internship 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/internship 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/intern'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.

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. For training programs in the occupational category of Hospitality and Tourism, the maximum duration of program participation is 12 months. 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 Aspire, Inc.

Fer front

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/Intern Program Host Company Verification				
Part 1 (please fill out the information – all fields are mandatory)				
Host Organization Name (DBA)		Corporate or Parent Company (if applicable)		
Complete Address (please include City, State and Zip Code)				
Year Registered/Incorporated	State Registered/ Incorporated		Employer ID Number	
Number of Full Time Employees Onsite at Location:	Number of J1 Trainee/Interns Onsite at Location		Number of H-2B workers at Location:	
Annual Revenue □ \$0 - \$3 Million □\$3 - \$10				
Type of Company				
□LLC □'S' Corp □Other				
Do you carry a valid Worker's Compensation Policy ? □Yes □No				
If yes, will the coverage be maintained for any and all trainee/intern's program duration? \Box Yes \Box No <i>Please attach a copy of the Policy Summary</i>				
Housing Dtrainee/intern search on own Host Company				
Estimated monthly cost of Host Company Housing (<i>(please provide additional information in the next page)</i>				
\$/month				
Estimated monthly cost of room and board in the area where trainee/intern is placed \$/month				
Transportation available for the trainee/intern commute to training site:				
□Host Company provided (company car or shuttle) □Public Transportation □Walk □Other				
Do you recommend an automobile purchase? Yes No Estimated transportation expenses: /month				
Company Description (please attach additional materials such as brochures, company summary, etc)				
Part 2 (please answer yes/no) If YES to any of the below Part 2 questions, please explain on an attached sheet, so we can assess whether ASSE ASPIRE can sponsor interns and trainees assigned to your company				
Do you have any full-time or part-time employees involved in teaching or responsible for childcare?				
Will you have any trainees or interns involved in teaching or responsible for childcare? UYes 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? \Box Yes \Box 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? Yes No				
Do you have any full-time or part-time employees involved with clients in a medical, psychological or social services				
setting? \Box Yes \Box No Will you have any trainees or interns involved with clients in a medical, psychological or social services setting?				
\Box Yes \Box 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? \Box Yes \Box No				
Will you have any trainees or interns spending more than 20% of their time on clerical work? \Box Yes \Box No				

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Additional information (please add information regarding Host Company Housing and/or Transportation and Part 2)