



## **Self Arranged Job Agreement Form**

**Please Print Clearly**

I certify that \_\_\_\_\_, D.O.B. \_\_\_\_\_  
has been offered an employment position with the below company. Additionally, I support  
that the information listed below is thorough and correct.

### **I. Employer Information**

Contact Name \_\_\_\_\_  
Title \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail \_\_\_\_\_  
Website \_\_\_\_\_  
Please provide a brief description of your company.  
\_\_\_\_\_  
\_\_\_\_\_

### **II. Employment Details**

Job title/position \_\_\_\_\_  
Descriptions of job responsibilities \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Start date \_\_\_\_\_ End date \_\_\_\_\_  
Starting wage \$ \_\_\_\_\_ Approximate # of hours per week \_\_\_\_\_  
How and when will paychecks be delivered? \_\_\_\_\_  
Nearest major/international airport \_\_\_\_\_

### **III. Housing**

Is housing available?  yes  no (check one)  
Cost of housing per week (if applicable)  
\$ \_\_\_\_\_  
If no, will you assist the student in finding suitable and affordable housing?  yes  no

**Additional Comments** \_\_\_\_\_  
\_\_\_\_\_

Signature of Authorized Employer Representative \_\_\_\_\_  
Date \_\_\_\_\_  
Print Name \_\_\_\_\_

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