

Dear Program Applicant,

Thank you for your interest in becoming an Intern/Trainee through the Council on International Educational Exchange (CIEE).

CIEE is authorized by the US Department of State to sponsor eligible candidates on programs of practical training as part of the J-1 Exchange Visitor Program. To verify basic program eligibility, and to ensure that the proposed internship/training is fully compliant with governing program regulations, CIEE has created a set of application materials to be completed by both the applicant and his or her proposed Host Organization. In order to complete their portion of the application, Host Organizations can be directed to CIEE's main program website ([www.ciee.org/trainee/newhc](http://www.ciee.org/trainee/newhc)), where they will find all relevant application materials and instructions for completing these. Alternately, applicants can also visit this same site to download the relevant Host Organization form, completing those fields that relate to his or her status and then forwarding on to the Host Organization for completion.

Applicants, on the other hand, are required to complete the following Intern/Trainee Program Application in its entirety and to submit it to the CIEE Representative in their home country or country of residence along with the completed Host Organization materials. In order to allow sufficient time for application processing and for the mandatory visa interview at the US Embassy or Consulate, CIEE recommends that applicants submit materials to the local CIEE Representative at least six weeks prior to their intended travel date. This timeline, however, may vary slightly from country to country, and applicants should therefore correspond directly with their local CIEE Representative to understand the exact process and procedures that apply to them.

Depending on your educational and professional background, you may be eligible for either the **Internship USA** or **Professional Career Training USA** program. If you are currently an enrolled student at an accredited post-secondary institution or will begin training within 12 months of graduation from such an institution, you should apply for the Internship USA program (INT). Candidates who have completed a degree in the proposed field of training and have at least one year of prior related work experience should apply for the Professional Career Training USA program (PCT). If you do not have a relevant degree, but you have at least five years professional experience in the field, you may also be eligible for PCT.

To help you in completing the Intern/Trainee Program Application, we have included checklists on the following page. Please use the respective checklist to guide you through the process of completing the application.

For further assistance, you may contact the CIEE Representative in your home country at any time. Additional instructions and information can also be found on CIEE's main program website at [www.ciee.org/trainee/applicants](http://www.ciee.org/trainee/applicants).

Thank you again for your interest in CIEE's Intern/Trainee Program and we look forward to working with you and your Host Organization in the near future.

Sincerely,



Liam Somers  
Director of Operations, Intern/Trainee Program

## Internship USA Checklist

## Professional Career Training USA Checklist

<input type="checkbox"/>	Applicant Information	<input type="checkbox"/>	Applicant Information
<input type="checkbox"/>	Financial Security Statement	<input type="checkbox"/>	Financial Security Statement
<input type="checkbox"/>	Proof of English Ability	<input type="checkbox"/>	Proof of English Ability
<input type="checkbox"/>	Proof of Student Status and Academic Endorsement - or - Copy of Academic Diploma	<input type="checkbox"/>	Copy of Academic Diploma <input type="checkbox"/> Not applicable
<input type="checkbox"/>	Interview Form <i>(To be completed by CIEE Representative)</i>	<input type="checkbox"/>	Interview Form <i>(To be completed by CIEE Representative)</i>
<input type="checkbox"/>	Program Information Page	<input type="checkbox"/>	Program Information Page
<input type="checkbox"/>	Applicant Declaration and Signature	<input type="checkbox"/>	Applicant Declaration and Signature
<input type="checkbox"/>	Form DS-7002 <i>(To be completed by US Host Organization)</i>	<input type="checkbox"/>	Form DS-7002 <i>(To be completed by US Host Organization)</i>
<input type="checkbox"/>	Certified Copy of Academic Transcript in English	<input type="checkbox"/>	Certified Copy of Academic Transcript in English
<input type="checkbox"/>	Copy of Valid Passport	<input type="checkbox"/>	Copy of Valid Passport
<input type="checkbox"/>	Copy of Resume or C.V.	<input type="checkbox"/>	Copy of Resume or C.V.
<input type="checkbox"/>	Copy of Previous Visas and DS-2019s or IAP-66s <input type="checkbox"/> Not applicable	<input type="checkbox"/>	Copy of Previous Visas and DS-2019s or IAP-66s <input type="checkbox"/> Not applicable
<input type="checkbox"/>	Application for J-2 Dependent(s) <input type="checkbox"/> Not applicable	<input type="checkbox"/>	Application for J-2 Dependent(s) <input type="checkbox"/> Not applicable

## APPLICANT INFORMATION

### Departure and Return Dates

Date of departure to US (mm/dd/yy):

Internship/Training Start date (mm/dd/yy):

*Must be no more than 14 days after departure date as listed above*

Internship/Training End date (mm/dd/yy):

*Must be no more than 12 months (INT) or 18 months (PCT) after Internship/Training start date as listed above*

Date of return to home country (mm/dd/yy):

*Must be no more than 30 days after Internship/Training end date as listed above*

### Personal Details (please fill these in as they appear on your passport)

Last name:

First name:

Middle name:

Gender:

Female  Male

Date of birth (mm/dd/yy):

City of birth:

Country of birth:

Country of citizenship:

Country of legal permanent residence:

Passport number:

Passport expiration date (mm/dd/yy):

### Contact Information

E-mail (mandatory):

Current street address:

Postal code:

City:

Country:

Telephone – Home (country code/ city code/ number):

Telephone – Mobile (country code/ city code/ number):

Permanent address ( Check if same as above):

Street address:

Postal code:

City:

Country:

## Emergency Contact

Last name:	First name:
Relationship to participant:	E-mail:
Home Telephone:	Mobile/Cellular:

## Previous Visas

Have you ever received a J-1 Visa to enter the US?  Yes  No If yes, how many?  
*(Please include copies of previous visas and DS-2019/IAP-66 forms)*

1) Type of program: <input type="checkbox"/> Summer work/travel <input type="checkbox"/> Au Pair or EduCare <input type="checkbox"/> Camp Counselor <input type="checkbox"/> Trainee <input type="checkbox"/> Intern <input type="checkbox"/> Other, specify:	Organization (employer): J-1 Sponsor: City: State:
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Dates of previous DS-2019 or IAP-66 (mm/dd/yy): From: To:

2) Type of program: <input type="checkbox"/> Summer work/travel <input type="checkbox"/> Au Pair or EduCare <input type="checkbox"/> Camp Counselor <input type="checkbox"/> Trainee <input type="checkbox"/> Intern <input type="checkbox"/> Other, specify:	Organization (employer): J-1 Sponsor: City: State:
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Dates of previous DS-2019 or IAP-66 (mm/dd/yy): From: To:

## Other Visa Information *(If you answered yes to any of these questions, please submit explanatory documentation with this application)*

Have you ever applied for a visa to immigrate permanently to the US?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been arrested and convicted of a crime in your home country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been arrested and convicted in the US?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been refused a visa by a US Embassy or Consulate?	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Financial Security Statement *(To be completed by the applicant and guarantor/bank official)*

Applicants who earn less than \$750 per month will have to show evidence that they will be able to support themselves during their entire stay in the US (duration of Internship/Training plus travel dates). The total amount required is \$750 multiplied by the total number of months spent in the US. Any stipend stated on the Training/Internship Placement Plan (Form DS-7002) is to be subtracted from this amount. For example, if you are paid \$350 per month, you must prove that you have an additional \$400 per month.

- My salary totals \$750 or more per month as indicated and confirmed by my US Host Organization.
- My salary does NOT total \$750 per month, but I have attached an original bank statement or certified copy of a bank's statement.
- My salary does NOT total \$750 per month, but I have a guarantor and I have attached a guarantor letter.

**English Ability** (Applicant must possess sufficient English language proficiency to successfully complete the Internship/Training program as outlined on Form DS-7002)

Native speaker, OR please choose one of the following

Attach a copy of an official score that you received on a standardized English exam (TOEFL, TOEIC, etc.)

Test: \_\_\_\_\_

Score: \_\_\_\_\_

Attach a copy of your grades/marks, translated to English, for English language classes taken as part of your post-secondary education. (At least two courses must have been taken in which high marks were received).

Complete in-person or telephone interview in English with prospective Host Organization Supervisor. (Supervisor also must confirm this on his/her portion of the CIEE Application).

Attach a letter from your English professor/docent certifying your English proficiency based on the categories outlined below.

Have your English professor/docent complete the following:

Oral English Ability	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Written English	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Listening Comprehension	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
	<i>Beginner:</i> Basic competence; conveys and understands only very basic meaning.	<i>Intermediate:</i> Partial command of language; understands overall meaning in most situations; able to handle general communication in own field.	<i>Advanced:</i> Fully competent use of language; able to use English accurately and fluently in any situation.

Additional comments about the applicant's knowledge of English and his/her ability to function in an English-speaking work place:

Name of Professor/Docent (please print):

Telephone:

Name of Educational Institution (please print):

Academic emblem or seal:

Signature:

Date (mm/dd/yy):

## Proof of Academic Status and Academic Endorsement

### Internship USA

#### Enrolled Students

If you are an enrolled student applying to the Internship USA program, you must have this section completed by an Academic Advisor, Placement Officer, Counselor, or Department Head from your academic institution. If your academic institution will not sign this form, you must attach a letter on official institution letterhead verifying the same information. The person completing this form should be instructed to complete it in English and not to use abbreviations.

Name of Academic Advisor:	Title:
Telephone:	E-mail:
Website:	
Name of academic institution:	
I certify that _____, the applicant for an internship program in the US, is currently enrolled at my institution.	
Years of study completed at the time of departure:	Anticipated graduation date (mm/dd/yy):
Major/field of study:	Name of diploma/degree:
Will this Internship program be evaluated by the academic institution? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How will your academic institution evaluate the Internship?	
<input type="checkbox"/> Written/oral report <input type="checkbox"/> On-site evaluation by an official from the school <input type="checkbox"/> Other, specify:	
How does your institution view this program?	
<input type="checkbox"/> It is required for the applicant to graduate, OR <input type="checkbox"/> It is an integral part of the curriculum, OR <input type="checkbox"/> It is optional but supported by our academic institution.	
I certify that the applicant may interrupt his/her studies for a maximum of _____ months to complete this Internship program.	
Signature:	Academic emblem or seal:
Date:	

#### Recent Graduates

If you have already graduated and will begin your Internship USA program within 12 months of graduation, please complete the following form.

<input type="checkbox"/> I certify that I have graduated. A copy of my diploma is attached.		
Date of graduation:	Degree Type:	Field of Study:

## Personal Information

Name:

## Education

University/Academic Institution Name:

Major Field of Study:

Type of Degree/Certificate:

(Anticipated) Date all requirements for degree completed:

Diploma Issuance Date:

University/Academic Institution Name:

Major Field of Study:

Type of Degree/Certificate:

(Anticipated) Date all requirements for degree completed:

Diploma Issuance Date:

## Work Experience

Company Name:

Nature of Experience (Circle One): Internship (Required by University: Y/N)    Apprenticeship    Volunteer    Part-Time Job    Full-Time Job

Position Title:

Country:

Dates: From (mm/dd/yyyy):

To (mm/dd/yyyy):

Number of Hours per week:

Job Responsibilities:

Company Name:

Nature of Experience (Circle One): Internship (Required by University: Y/N)    Apprenticeship    Volunteer    Part-Time Job    Full-Time Job

Position Title:

Country:

Dates: From (mm/dd/yyyy):

To (mm/dd/yyyy):

Number of Hours per week:

Job Responsibilities:

## Work Experience (continued)

Company Name:				
Nature of Experience (Circle One): Internship (Required by University: Y/N)      Apprenticeship      Volunteer      Part-Time Job      Full-Time Job				
Position Title:				
Country:				
Dates: From (mm/dd/yyyy):		To (mm/dd/yyyy):		
Number of Hours per week:				
Job Responsibilities:				

Company Name:				
Nature of Experience (Circle One): Internship (Required by University: Y/N)      Apprenticeship      Volunteer      Part-Time Job      Full-Time Job				
Position Title:				
Country:				
Dates: From (mm/dd/yyyy):		To (mm/dd/yyyy):		
Number of Hours per week:				
Job Responsibilities:				

If you do not have any work experience, please describe the knowledge and skills you have acquired through your academic studies that are particularly relevant to your proposed training. Include specific course names where appropriate.

## Professional Career Training

If you are an applicant to the Professional Career Training USA program, you need not have a post-secondary degree. However, your academic record does impact your program eligibility and we therefore require that you complete the following:

I certify that I have graduated. A copy of my diploma is attached.

Date of graduation:

Degree Type:

Field of Study:

I also have at least 1 year of experience in the field of training in which I intend to complete my Internship.

I do not hold a degree in a relevant field, but I have at least 5 years of experience in the industry/field in which I intend to train. A copy of my resume or CV is attached.

## PROGRAM INFORMATION

Name of Host Organization:

Address:

City:

State:

Zip Code:

Contact name:

Telephone:

Fax:

1. What knowledge and/or skills have you acquired during your studies or previous work experience that has prepared you for this Internship/Training program?

2. What are your future professional goals and how will this Internship/Training program assist you in fulfilling those goals upon return to your home country? Please be as specific as possible.

3. Explain the skills and knowledge you aim to acquire from this Internship/Training.

## PARTICIPANT DECLARATION

The following section serves to outline the terms and conditions of the Applicant's participation on CIEE's Intern/Trainee Program. We require that you carefully read the following information, and confirm that you have read, understood and agree to these terms by signing and dating the last page. If you fail to sign or date this section, we will be unable to process your application until you have done so.

### SECTION I. – Applicant Responsibilities

1. The Applicant agrees that all the information provided in the application is true to the best of his or her knowledge, and acknowledges that any false or misleading information may lead to the rejection of the application or, if discovered later, to immediate dismissal from the program.
2. The Applicant is responsible for considering his or her personal health and safety needs when applying for and participating in the program. If the Applicant suffers from any health or other condition that would create a risk for him or her while abroad, he or she should not apply.
3. The Applicant agrees to pay all fees in accordance with the requirements of the CIEE Representative through which he or she is submitting an application.
4. The Applicant is responsible for submitting all requested documentation (including a passport) to the CIEE Representative in a timely fashion for visa processing. CIEE cannot be held responsible for any additional costs incurred (including the cost of rebooking a flight) by the Applicant due to delays in submitting documentation or delays by the US Embassy in issuing a visa. Moreover, CIEE advises the Applicant not to book a flight until she or he has secured the visa, since CIEE cannot be held responsible for the costs of rebooking or cancelling a flight due to delays in processing or visa rejections.
5. The Applicant must pay the local visa fee to the US Embassy. The Applicant is also responsible for any additional visa fees that might apply at the US Embassy or Consulate in the country where he or she is applying for the visa, as well as the government SEVIS fee collected as part of the application.
6. The Applicant will be subject to English language screening and will need to complete an interview in order to participate in the program.
7. The Applicant must supply CIEE with the name and contact details of next of kin to be contacted in the case of emergency.
8. The Applicant must not submit a program application with the intent to train in the US in prohibited positions, including as an au pair, childcare giver, teacher, teaching assistant, camp counselor, in private households, as a ship or aircraft crew member, or as medical staff having patient contact. More information on prohibited positions can be found on CIEE's main program website at [www.ciee.org/trainee](http://www.ciee.org/trainee).
9. If the Applicant has recently held a J-1 Exchange Visitor Visa for the US, he or she may have to remain in his or her home country for a period of 90 days before beginning of new J-1 program.
10. CIEE may issue a DS-2019 form if the Applicant meets all relevant program requirements, but has no control over the decision of the US Embassy or Consulate in the Applicant's country of residence to issue a J-1 Visa.

### SECTION II. – General Program Participant Responsibilities

1. The Participant is responsible for reading and carefully considering all materials made available to him or her that relate to safety, health, legal, environmental, political, cultural and religious customs and conditions in the US. The Participant must take full responsibility in the event that laws, regulations, or customs are broken, regardless of his or her actual knowledge of these laws, regulations, or customs.
2. In addition to reviewing all program materials, the Participant may be required to complete a CIEE orientation online.
3. The Participant must exercise due care once in possession of the legal documentation (DS- 2019, DS-7002, J-1 Visa, etc.) for the program. The Participant should be advised that these documents are difficult to replace and that she or he shall bear the cost of replacing these items if they are lost.
4. The Participant is responsible for all of his or her acts along with any resulting loss or damage while on the program. The Participant agrees to indemnify and hold harmless CIEE for damages or loss to any party caused by his or her conduct.
5. The Participant is required to maintain communication with his or her Host Organization prior to arrival, notify the Host Organization in advance of his or her arrival and departure dates, and promptly advise the Host Organization of any changes to his or her travel itinerary due to visa delays or any unforeseen circumstances.
6. All travel before, during and after the program is at the Participant's own risk. Also, if the Participant chooses to operate motorized vehicles, he or she is responsible for obtaining the necessary license, permission and insurance, and does so at his or her own risk.
7. Once the Participant has commenced his or her travel to the US, CIEE cannot amend the program dates as listed on the DS-2019 for any reason. It is the Participant's responsibility to check the program start and end dates prior to traveling to the US to ensure that the dates are correct.
8. If during the course of the program the Participant encounters any difficulties with his or her training position, or with safety, health, housing, the Participant should notify CIEE as soon as possible by phoning CIEE at 1-888-268-6245. In the event of an emergency, the Participant can also reach CIEE at the above number any time night or day.
9. The Participant is required to comply with all US Government visa and immigration requirements, including the SEVIS requirement as follows:
  - a) Notification of arrival at US Host Organization to CIEE within 20 days of the DS-2019 program start date.
  - b) Notification to CIEE of any change in US home address within 10 days of the change.
10. The Participant agrees that he or she will not engage in any activity that would bring the Intern/Trainee Program or the US Department of State into notoriety or disrepute. The Participant should contact CIEE for guidance if any proposed activity might cause this result.
11. The Participant agrees to complete an online evaluation at the mid-point and end of the program.

### SECTION III. – Participant Responsibilities with Respect to His or Her US Host Organization

1. CIEE does not guarantee the availability of internship/training positions. A Host Organization's representation that a position is being held does not constitute a binding contract that the internship/training position will be available when the Participant arrives. The Host Organization's commitment is one of good faith only. In addition, if the Participant does not have sufficient English proficiency, does not arrive on the expected start date, or made any false or inaccurate statement on the application, the Host Organization may choose not to provide training. Furthermore, if the Participant does not meet the contractual obligations of the Host Organization or of CIEE, the program may, at CIEE's sole discretion, be terminated.
2. CIEE and its Representatives are not responsible for any expenses incurred by the Participant if he or she has not started training by the agreed date due to any circumstances not under the direct control of CIEE or its Representatives.

3. The Participant must only train at the Host Organization listed in his or her application and on the DS-2019 form. If for any reason a change of Host Organization becomes necessary, The Participant must contact CIEE, submit a new Host Company Training Proposal, and obtain approval from CIEE before changing internship/training positions. Failure to do so will result in the Participant's withdrawal from the program.
4. If the actual internship/training position deviates significantly from the terms set forth in Form DS-7002, or if the internship/training environment, for whatever reason, proves unsupportive, the Participant should contact CIEE directly. If warranted, CIEE will endeavor to assist the Participant in finding another position. However, CIEE makes no guarantee that it will be able to do so and, furthermore, makes no representation that it will be able to find an internship/training position for the Participant in the same geographical area or at the same compensation level.
5. If Participant is terminated by the Host Organization from the internship/training program for non-compliance with the Internship/Training Placement Plan or the workplace rules of the Host Organization, he or she will be also terminated from the program.
6. If the Participant's original internship/training program, for whatever reason, ends prior to the end date listed on the DS-2019 form, it is the Participant's responsibility to inform CIEE as soon as this is known and, in any case, before the last day of training. Depending on the situation, the Participant will either be required to end the program early or allowed to search for a new internship/training position.
7. Once the Participant has arrived in the US to begin his or her program, CIEE will not for any reason refund his or her program fees nor be responsible for the refund of any fees paid to third parties (e.g., the US Department of State, SEVIS, etc.).
8. The Participant agrees not to engage in training in any unskilled or casual labor positions, in positions that require or involve child care or elder care, or in any kind of position that involves patient care or contact. Furthermore, Participant also agrees not to engage in training in a position that involves more than 20 percent clerical work.

#### **SECTION IV. – Participant Responsibilities at the Conclusion of the Internship/Training Program**

1. The Participant agrees that he or she intends to return home upon completion of the program and not to attempt to stay in the US.

#### **SECTION V. – Contractual Terms and Other Program-Related Conditions**

1. This English language version of the Intern/Trainee Program Application, including this Participant Declaration, is the binding contract between the Participant and CIEE.
2. CIEE makes no representation or warranty of any kind, expressed or implied, as to the suitability of the program for the Participant, and CIEE disclaims all such warranties to the full extent of the law.
3. The conduct of the Intern/Trainee Program is subject to US government approval and may change without notice.
4. CIEE does not own or operate any entity which provides goods or services for the program, including but not limited to arrangements for or ownership or control over houses, apartments or other lodging facilities; airline, vessel, bus or other transportation companies; food service; or entertainment providers. All such persons and entities are independent contractors and enter into legal relationships directly with the Participant (and not through CIEE). As a result, CIEE is not liable for any act or failure to act of any such person or entity, or of any third party. Without limitation, CIEE is not responsible for any injury, loss, or damage to person or property, death, delay or inconvenience in connection with the provision of any goods or services occasioned by or resulting from, but not limited to, acts of God, force majeure, acts of war or civil unrest, insurrection or revolt, strikes or other labor activities, criminal or terrorist activities of any kind, overbooking or downgrading of accommodations, structural or other defective conditions of houses, apartments or other lodging facilities (or in any heating, plumbing, electrical or structural problem therein), mechanical or other failure of airplanes or other means of transportation or for any failure of any transportation mechanism to arrive or depart timely, dangers associated with domestic or wild animals, sanitation problems, food poisoning disease, lack of, access to or quality of medical care, difficulty in evacuation in case of medical or other emergency, or for any other cause beyond the direct control of CIEE.
5. The Participant agrees that any dispute concerning, relating, or referring to the Internship/Training Placement Plan, the Intern/Trainee Program Application, any other literature concerning the program, or the program itself shall be resolved exclusively by binding arbitration in Maine, according to the existing rules of the American Arbitration Association. Such proceedings will be governed by Maine law.
6. CIEE reserves the right to refuse sponsorship to any applicant that CIEE deems does not meet program eligibility requirements or any applicant that CIEE does not deem appropriate to accept in the general interests of the program. In the event that CIEE rejects the Applicant's application to the program, any applicable refund will be made via the CIEE Representative through which the original application was submitted.
7. Program participation begins on the day of departure from the Participant's home country and terminates on the day of departure from the US (so long as this occurs within the legal program dates). The maximum length of training is 12 months for Interns and 18 months for Trainees; however, the overall period of time in the US may extend beyond the respective maximum durations as follows:  
The Participant can arrive to the US a maximum of 14 days prior to the DS-2019 program start date and remain in the US for up to 30 days beyond the DS-2019 program end date. The 30 days after the program end date represent a "Grace Period" extended to the Participant by the US Government. This period is intended to be used for travel within the US and the Participant is not allowed to train or to work in any capacity during this time. Moreover, the Participant also is not allowed to leave and re-enter the US during this period, since the DS-2019 has expired.
8. As part of this program, the US Government requires that all participants have a certain level of insurance coverage, which CIEE includes as a mandatory part of its program. The Participant is automatically covered within the internship/training program dates as outlined on the DS-2019 form. Should the Participant plan to arrive to the US before the program start date, or to remain in the US after the program end date during the "Grace Period" as outlined above, this must be made known to CIEE during the initial processing of the application. CIEE cannot be held responsible for any insurance claim made outside of the insurance dates confirmed to the Participant in his or her pre-departure program materials.
9. Under the US government's Health Insurance Portability and Accountability Act (HIPAA), CIEE is restricted in its access to certain medical information or records in the event that a participant has an accident in the US. In order for CIEE to assist the Participant to the fullest extent possible with insurance-related issues, CIEE will need to have a signed Privacy and Confidentiality Release Form from the Participant. This form is optional and the Participant can choose whether or not CIEE is granted access to this information.
10. CIEE reserves the right to dismiss the Participant from the program if, in its best judgment, the Participant is deemed to be a danger to him- or herself or to others, or if his or her conduct is deemed to be detrimental to the program in any way. In the event of such a dismissal, CIEE shall not be held responsible for any resulting expenses incurred by the Participant such as airfare, and shall not be required to return any fees paid by the Participant.
11. Once the Participant has departed for the US, he or she will receive no refund should he or she choose to withdraw or terminate her or his program. The Participant will also receive no refund should CIEE find it necessary to withdraw sponsorship after the Participant has departed for the US.
12. CIEE and its Representatives do not provide housing. Whether the Participant arranges housing independently or through the Host Organization where possible, he or she will be required to sign a lease and pay a deposit, which usually amounts to the first and last month's rent and may include an additional security deposit.

#### **Participant Signature**

By signing below, you indicate that you have read, understood and agree to all terms outlined in the Participant Declaration section. Additionally, by signing below, you also confirm that, to the best of your knowledge, all information contained in the Intern/Trainee Program Application is true and accurate.

Participant Signature:

Date:

## Privacy, HIPPA and Confidentiality Release Form *(To be completed by Applicant)*

By completing this form, you consent to CIEE, CIEE's designated insurance claims management company, your physician's and/or other medical providers to discuss medical and/or insurance issues with CIEE or CIEE's designated insurance claims management company.

You also consent to CIEE that we may notify your emergency contact listed in this application of any situation that CIEE deems to be an emergency. You also consent to CIEE that CIEE may notify your official CIEE Partner from whom you purchased this program of any situation that CIEE deems to be an emergency.

**This authorization is valid for 2 years from the date signed.**

**I give CIEE permission to release any or all of the following information. (Please initial and select)**

- Initial:  All financial and claim information related to medical bills or Claimant's Statement and Authorization
- Initial:  Provide name, date or service, total charge, total paid and date of payment.
- Initial:  Insurance ID number and/or social security number.

*Under no circumstances can CIEE release medical information obtained from your physician or provider of service to you or anyone. Your medical information has been disclosed to us from your physician or provider of service and we are prohibited by federal law for further disclosure. Please contact your physician or provider of service for your medical information.*

Print Patient Name:

Date: (mm/dd/yy)

Signature of Patient, Adult Parent or Guardian:

## FOR CIEE REPRESENTATIVE USE ONLY

### Intern/Trainee Interview Form

I confirm that I have interviewed the applicant and posed the following questions to her/him. Based on her/his response, as well as on the other information submitted as part of the application process, I feel that this applicant is an appropriate candidate for the Intern/Trainee Program and that s/he has a proper understanding of its purpose and intent.

1. How did applicant locate his or her internship/training program?
2. Has the applicant ever been to the US before? If so, for what purpose?
3. What is the applicant's educational and/or career plan upon returning to home country?

Interviewer Name:

Signature:

Title and Organization:

Interview Date: (mm/dd/yy)

Interview was conducted:

- In-Person
- Webcam
- Videoconference
- Telephone

### Program Type

Please check all boxes that apply to this application:

- Internship USA
- Professional Career Training USA
- Trainee Select
- CIEE Recruitment Fair

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