



International Student Exchange, Inc.

119 Cooper Street - Babylon, NY 11702

Phone: 1-877-669-0717

Fax: 1-631-893-4547

TRAINEE PROGRAM – HOST COMPANY QUESTIONNAIRE

Host Company Name: _____

Brief Description: _____

Contact Person: _____

Address: _____

E-mail: _____ Website: _____

Telephone: _____ Fax: _____

TRAINEE INFORMATION

Number of positions: _____ (approximately)

Positions available: _____

Dates of Trainee Program: _____

Approximate salary: _____ Pay frequency: _____

Schedule: _____ Other benefits: _____

HOUSING AND TRANSPORTATION INFORMATION

Is there housing available? ☐ YES ☐ NO

Brief description: _____

Cost of housing: _____ Cost of housing deposit: _____

Transportation: _____

HOST COMPANY NEEDS

Gender: _____ Age: _____ Country: _____

Level of English: _____ Skills required: _____

ADDITIONAL INFORMATION

Would you be able to provide pick-up? ☐ YES ☐ NO

Brief description of the community area: _____

Any specific comments you would like the international staff to know:

Signature: _____ Date: _____



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Part I: TRAINEE OFFER BY HOST COMPANY

(This form must be completed by the host organization as a basis for issuing the DS 2019 form. Please not that the trainee will receive a copy of this form.)

1. Name of Host Company: _____
2. Type of Business: _____
3. Address of Organization: _____
4. Location of Trainee Program *(if different)* _____
5. Title of Trainee Position: _____
6. Starting Date: _____
7. Supervisor of Trainee: _____
8. E-mail: _____
9. Number of Employees at the Host Company Site: _____
10. Are there any preconditions (i.e. medical tests) for the Trainee: ☐ YES ☐ NO
11. Other items you wish to share with trainee: _____

PART II: TRAINEE PROGRAM PLAN

(Please respond to the questions below on your company letterhead.)

1. List the departments or sections of the company to which the participant will be exposed (length of time in each area).
2. Describe the trainee activities and responsibilities in each department in which the intern will be involved.
3. What guidelines / procedures / policies will your company use to educate the trainee?
4. What skills and knowledge will the trainee acquire during the program?
5. Orientation and Supervision:
 - A. Describe in detail the orientation program for the trainee (formal/informal).
 - B. How will the participant be oriented to the corporation in which he /she is training?
 - C. How will the trainee be supervised?
6. Hours:

How many per week will the participant be required to train?
7. Home stay issues:

If necessary, can you assist the trainee in finding a place to live? ☐ YES ☐ NO