



IAESTE United States Work Permit Service Guidelines and Application

IAESTE United States' Work Permit Service is designed for students of U.S. universities who have secured their own international internships and need working papers to legally enter and work in their country of training. Please carefully review ALL of the information in these guidelines before submitting an application.

Eligibility

In order to apply for the IAESTE Work Permit Service, you must fulfill all of the eligibility conditions below. If you have questions concerning your eligibility, please contact us at iaeste@aipt.org.

- **Internship Offer:** you must have received a firm internship offer from an overseas employer. We cannot assist until a commitment has been made by the employer. Additionally, your employer must be prepared to register with our counterpart office and pay any necessary fees, which vary by country.
- **Training:** the internship must be directly related to your field of study. Internships must also consist of 35 hours per week and be paid.
- **Age:** you must be at least 18 years of age at the time of application, and not more than 30. (This is the age mandated by IAESTE's international body.)
- **Enrollment:** you must be currently enrolled full-time in a Bachelor's, Master's, or Ph.D. program at an accredited 4-year U.S. college or university at the time of application. We cannot accept recent graduates.
- **Citizenship:** you are not required to be a U.S. citizen to qualify for our assistance. International students studying in the U.S. are welcome to apply. However, some nationalities require additional visa or entry documents. Non-U.S. citizens/permanent residents must normally hold a **valid** U.S. visa and supporting documents (I-20/DS-2019/I-94) in order to receive a visa for the country of training (if applicable).
- **Residence:** you must be living in the United States at the time of application.
- **Major:** the Work Permit Service is designed primarily for students in technical fields of study (i.e. engineering, computer science, math, natural and physical sciences, architecture, and agricultural science). However, we can assist students in other fields of study depending upon the country of training; please contact us at iaeste@aipt.org for current information.

Procedures

1. You will **submit the application materials** which follow. A complete application package includes the "Work Permit Service" application form (which includes the U.S. Student Insurance form), the program fee plus any insurance fees (if applicable), and any other documents requested for your country of training (please see "**country-specific requirements**" for details).
2. Your **employer will register** with the IAESTE office in their country. If your employer has not already done this, we will supply the contact information for our IAESTE counterpart.
3. Once registration is complete for both you and your employer (including all fees and completed applications), **we will prepare and send you the appropriate working documents**. Please note that the working documents will not be released until both you and your employer have registered with the appropriate IAESTE office.
4. If necessary, you will **obtain a visa/permit** for your country of training from that country's Embassy/Consulate General in the United States with guidance from our office. Visa/permit fees are the sole responsibility of the applicant.
5. You will **depart the United States** for your internship.

Fees

- A **non-refundable** program fee must accompany your application; the fee structure is below. Please make checks or money orders payable to IAESTE United States. We also accept American Express, Visa, or MasterCard; a credit card payment form follows if you wish to pay in this manner.
- Some IAESTE countries will charge an employer fee as part of the registration process; this fee will be the employer's responsibility and should be paid directly to the IAESTE counterpart in your host country at the time of registration.
- If you choose to purchase health insurance through IAESTE United States, payment in full for the duration of your internship is required at the time of application. We unfortunately cannot accept partial or deferred payment.
- If you are a citizen or legal resident of a country besides the U.S. and request to have your working documents sent to your home country, you will be responsible for shipping charges.

Fee Structure (effective January 1, 2008)

The fee structure is based on the length of the internship and your field of study. If you are unsure whether your field qualifies as technical, please contact our office at iaeste@aipt.org. IAESTE United States has the sole authority to categorize majors as technical or non-technical.

Program length	Technical Majors	Non-technical Majors
Less than 3 months	\$350	\$700
3-6 months	\$450	\$850
6-12 months	\$550	\$1000

Processing Time

- Normal processing time for IAESTE work documents is 4-6 weeks.
- We cannot begin processing your documents until both you and your employer have registered with the appropriate IAESTE office and paid all necessary fees.
- If you require a visa or other type of entry permit (work/residence), additional processing time will be required. Please note that this process takes place **after** we release your work documents, not concurrently. We will provide detailed instructions on how to apply for the necessary visa/permit at the time we release your work documents. Please allow an additional 4-6 weeks depending on your internship country; you may request an estimated processing time from IAESTE United States.
- Visas/permits normally take longer to be issued if you are not a U.S. citizen and/or your training is longer than three months.
- IAESTE United States has absolutely no control over the processing time required to obtain a visa/permit from another country's embassy or consulate.

Other Important Information

- **Flight Arrangements:** Do not make flight arrangements until after you have **received** all necessary entry documents, including the IAESTE working documents and visa/permit from your internship country's Embassy (if applicable). **You may not enter your internship country without all required legal documentation.** If you enter your internship country without the necessary legal documentation, IAESTE will immediately revoke its sponsorship of your internship and you will be at risk for deportation. If you have already made flight arrangements, IAESTE will not be responsible for delays or costs incurred for changing your flight.
- **Health Insurance:** You must carry adequate health insurance for the entire duration of your training abroad. You have the option of using your own personal coverage or purchasing insurance from IAESTE United States (*except for students interning in Switzerland – see Work Permit Service Package for Switzerland*). The U.S. Student Insurance Form which follows must be completed and returned to our office with payment **in full** (if applicable).

- **Housing:** Arrangements for housing during the internship are the responsibility of you and your employer. If our office is notified in advance, our counterpart office in your host country may be able to assist in arranging housing, but we cannot guarantee that this service will be available.
- **Passport:** It is solely your responsibility to ensure that your passport is properly endorsed with the proper visa stamp in accordance with the host country government regulations and any written instructions provided by IAESTE United States. Some countries may require your passport to be valid for a certain period of time after you intend to leave your country of training; if your passport will expire less than six months after the intended end date of your internship, we strongly recommend having it renewed prior to leaving the U.S.
- **Shipping:** For U.S. citizens, working documents will only be shipped within the U.S. Citizens or legal residents of countries besides the U.S. may have documents shipped within the U.S. or to your home country. As noted above, if you request to have your working documents sent to your home country, you will be responsible for shipping charges.

Country-Specific Requirements (in alphabetical order by country)

- **Australia:** Please include with your application a copy of your passport and your resume.
- **Belgium:** Please include with your application a legible copy of your passport and a certificate of enrollment stating that you are currently a full-time student.
- **Finland:** Please include with your application a copy of your résumé and a typed list of all of the courses you have taken at your university.
- **Germany:** Please include with your application a resume, a typed list of all of the courses you have taken at your university, and a certificate of enrollment stating that you are currently a full-time student.
- **Japan:** There will be some additional paperwork to complete; please contact our office for details.
- **Netherlands:** Please include with your application a copy of your passport and a certificate of enrollment stating that you are currently a full-time student.
- **Sweden:** Please include with your application a copy of your passport and a certificate of enrollment stating that you are currently a full-time student.
- **Switzerland:** This is **not** the correct application package; please download the "Work Permit Service Package for Switzerland" from www.iaesteunitedstates.org.

Terms and Conditions

IAESTE United States is a program of the Association for International Practical Training (AIPT), a private, non-profit, educational exchange organization dedicated to encouraging and facilitating the exchange of qualified individuals between the United States and other countries in order that they may gain practical work experience and improve international understanding.

The applicant and his or her legal representatives release AIPT, Inc., its officers, employees, agents and cooperating AIPT agencies from any liability for any injury, loss, damage, accident, deviation, delay, or curtailment, whether caused by negligence or otherwise, or the consequences thereof, which may occur during any part of the travel or training in connection with the program applied for.

Without limiting the foregoing, the applicant acknowledges and agrees that AIPT, Inc., its officers, employees, and agents shall not be responsible for any injury, loss, damage, or delay resulting from:

- any act of God, act of public enemy, arrest or restraint of any government, seizure under legal process, quarantine restrictions, riots or civil commotion, strikes, lockouts, or labor stoppages (regardless of fault), war, or hazards or dangerous incidents due to a state of war;
- any act, error, or omission on the part of any program participant or participants;
- any defect in any ship, airplane, bus, automobile or other vehicle engaged by any AIPT cooperating agency or the participant, or the failure of such ship, airplane, bus, automobile, or other vehicle to comply with any part of local rules and regulations;
- any act of neglect of any person or company whose services are obtained by any AIPT overseas cooperating agency for the benefit of program participants, including but not limited to: hotels, rooming houses, "visitor hospitality" organizations, individual volunteers, guides, and transportation companies;
- any deviation or delay of any kind, however caused.

Checklist

- I have fully completed and signed the Work Permit Service application.
- I have fully completed and signed the U.S. Student Insurance form.
- I have included all required country-specific materials.
- I have made a check/money order payable to IAESTE United States for the program fee plus any applicable health insurance fees OR completed the credit card authorization section of the Work Permit Service application.
- I have read and understood all of the information in the Work Permit Service Guidelines.
- The Parties [person or entity named in this application] agree that arbitration is the required and exclusive forum for the resolution of any and all disputes between them. Read the entire arbitration agreement on our Web site at www.aipt.org/arbitration_agreement or request a copy be sent to you by contacting us at 410.997.2200.
 - I have read the entire arbitration agreement statement and my signature on this application verifies my agreement to this provision.



IAESTE United States Work Permit Service Application

Important Information:

1. Please be certain that you have read and understood the preceding "Work Permit Service Guidelines" before submitting this application form.
2. This application must be typed.
3. Please write out months in all dates (example: April 7, 1985).
4. Payment **in full** must accompany this application, including all insurance fees (if applicable).
5. Working documents will only be shipped within the United States to U.S. citizens. Non-U.S. citizens/residents may request to have documents shipped to your home country, but will be responsible for shipping charges.
6. This application is NOT for students interning in Switzerland; if you are interning in Switzerland, please download the appropriate application from www.iaesteunitedstates.org.

Personal Information:

Name as it appears on your passport:			
First/Given Name:	Middle:	Last/Family Name:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married	If married, how many dependents will accompany you?	
Date of Birth: ,	Country of Citizenship:		
Birth City:	Country of legal residence:		
Permanent Address:	City:	State:	Zip:
	E-mail:	Tel:	
I will reside at this address until: ,			
Current Address:	City:	State:	Zip:
	E-mail:	Tel:	
Passport Number:	Passport Expiration Date: ,	Issuing Country:	
How did you learn about IAESTE United States?			

Academic Information:

Name of University:			
Major:	Minor:	Number of Years Completed:	Required:
Expected Month/Year of Graduation: /	Type of Degree Expected (BS, MS, etc):		

Employer Information:

Name of Employer:			
Name of contact person:		Title of contact person:	
Complete mailing address (must be a branch in your country of training, not the U.S.):			
City:	State/Postal code:	Country:	
Telephone Number:	Fax number:	E-mail:	
Title of position offered to you:			
Salary: (amount) (currency), per (hour/week/month)	Hours worked per week:		
Please give a brief description of your duties:			
Tentative internship start date: ,	Tentative end date: ,		
Your tentative departure date from the U.S.: ,			

TERMS AND CONDITIONS**I certify to IAESTE United States that:**

- The information given in this application is complete and accurate to the best of my knowledge;
- I will make every reasonable effort to follow all instructions given to me by IAESTE United States and its cooperating agencies;
- Should any of this information change after I submit this application, including but not limited to current address, tentative internship start date and tentative departure date from U.S., I will notify IAESTE United States; and
- I have read, understood, and agree to the terms and conditions set forth in the "Work Permit Service Guidelines."

Yes! I agree to the above conditions.

Please "sign" below if completing electronically. This form of signature is considered valid and binding.

Signature:

Date: ,

Please send your completed application with fee payment to the address below. Faxed or e-mailed applications must be accompanied by a completed credit card payment form.

IAESTE United States
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Suite 250
Columbia, MD 21044-3519

tel: 410.997.3069
fax: 410.997.5186

e-mail: iaeste@aipt.org
www.iaesteunitedstates.org



IAESTE United States U.S. Student Insurance Guidelines

In accordance with IAESTE's international regulations, all participants in IAESTE internships **must** be covered with adequate health insurance. IAESTE United States offers coverage at a reasonable price, but you may use your current insurance plan provided that it meets the following limits:

Medical and Accident	\$50,000 per illness/accident
Medical Evacuation/Repatriation	\$50,000
Return of Mortal Remains	\$15,000

If you are currently covered by an insurance policy, please contact your carrier to verify that your coverage meets or exceeds these amounts and that it will cover you while overseas. Many American plans are only valid in the United States, and many do not include Medical Evacuation/Repatriation (MER).

You now have three options:

- 1) I have no health insurance coverage OR my current health insurance coverage does not meet the above limits. I will purchase full coverage, which includes MER, through IAESTE United States at this time.
- 2) I have health insurance coverage which is valid overseas and meets basic limits, but does not include MER. I will use my insurance policy for basic medical coverage, and purchase coverage for MER only at this time from IAESTE United States.
- 3) I have health insurance coverage which is valid overseas and includes MER up to the above limits. I don't need to purchase any insurance from IAESTE United States.

Please check below which option you choose and complete all requested information.

Option 1—full coverage through IAESTE United States (includes MER)

Beginning date of full coverage: _____,

This must be no later than the first day of your training, but you are welcome to have the insurance activated as soon as you leave the United States.

End date of full coverage: _____,

This must be no earlier than the last day of your training, but you are welcome to have the insurance active as long as you plan to remain outside of the United States (up to three months after your last day of training).

Option 2—MER coverage through IAESTE United States, basic coverage through your current policy

Beginning date of MER coverage: _____,

This must be no later than the first day of your training, but you are welcome to have the insurance activated as soon as you leave the United States.

End date of MER coverage: _____,

This must be no earlier than the last day of your training, but you are welcome to have the insurance active as long as you plan to remain outside of the United States (up to three months after your last day of training).

Option 3—full coverage through your current policy (please see next page)

Please complete this section if you have chosen Options 2 or 3:

Company Name

Mailing Address

Website (if known)

Policy Number

Effective Dates , through ,

If you have opted to purchase either kind of insurance through IAESTE United States, you must make payment for the entire duration of your internship **in full** at this time—we cannot accept partial payment. Our insurance costs are calculated on a full-month basis but not necessarily on a calendar month basis; however, we unfortunately cannot prorate for coverage for part of a month.

Examples: June 1-August 1 = 2 months = \$60 for full coverage/\$10 for MER;
 June 1-July 4 = 2 months = \$60/\$10; June 15-August 15 = 2 months = \$60/\$10

We will send you a card and information about the policy, including how to make claims. We highly encourage you to read the policy carefully. If we receive this form less than one week before your scheduled departure, we will send the policy information to your overseas employer—please ask your supervisor for it when you arrive. The coverage will be in effect on the beginning date which you indicated, but is only valid outside of the United States.

Please contact our office if you would like to purchase coverage for any accompanying dependents.

Please complete the insurance verification statement below.

My signature below certifies that:

I am aware that all trainees and accompanying dependents who train abroad under the auspices of IAESTE United States must be covered by health and accident insurance for the entire duration of their training, commencing with their departure from the United States.

I hereby certify that my insurance policy meets or exceeds the coverage limits set by the United States Federal Regulations as listed below:

Medical and accident	\$50,000 per illness/accident
Medical evacuation/repatriation	\$50,000
Return of mortal remains	\$15,000

I also certify that this coverage, be it through IAESTE United States or another provider, will be in effect beginning with my departure from the United States and continuing through the entire duration of my training in the host country. If this policy is not valid through the entire duration of the training period, I certify that it can and will be renewed.

Yes! I agree to the above conditions.

Please “sign” below if completing electronically. This form of signature is considered valid and binding.

Signature:

Date: ,

If you have questions about anything related to health insurance, please contact our office.



IAESTE United States Payment of Funds

AIPT/IAESTE United States will not accept payments from overseas in the form of electronic transfers due to delays and service charges imposed by our bank for the processing of these types of payments.

All payments may be made by credit card (see below) or check (see instructions on next page).

Payment Information (please complete):				
Program ID (for office use only)	Fee Type	Cost of Fee	Quantity	Total
	Program Fee – technical majors, less than 3 months	\$350		\$
	Program Fee – technical majors, 3 to 6 months	\$450		\$
	Program Fee – technical majors, 6 to 12 months	\$550		\$
	Program Fee – non-technical majors, less than 3 months	\$700		\$
	Program Fee – non-technical majors, 3 to 6 months	\$850		\$
	Program Fee – non-technical majors, 6 to 12 months	\$1000		\$
	Health Insurance (full coverage; includes MER)	\$30 per month		\$
	Health Insurance (MER coverage only)	\$5 per month		\$
	Other:			\$
Total				\$

Credit Card Information:			
Student Name:		Student E-mail Address:	
University/College:		Employer Name:	
Card Type:	<input type="checkbox"/> American Express	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
			Amount of Charge: \$
Account Number:			Exp. Date (month/day/year):
Name as it appears on card:		Authorized Signature*:	

**Original signature required for payment. You may return by fax or email (scanned) to IAESTE United States. It is not necessary to send an original paper copy to IAESTE United States.*

Office Use Only:
OFFICE USE ONLY: <input type="checkbox"/> Refund <input type="checkbox"/> Charge Date of Order: _____ Initials: _____ APS Transaction Number: _____ Reason for charge (note fee type and amount per fee): <p style="text-align: center;"><i>Please type or write legibly. Processing is subject to credit approval. Fees are subject to change without notice.</i></p>

Check Information:

All payments to AIPT/IAESTE United States should:

- be made payable to AIPT/IAESTE United States
- be in U.S. dollars
- be drawn against a bank with an office in the United States
- use the U.S. electronic coding symbols across the bottom of the check

⇒ Note examples of each of these requirements on the sample check below.

- An international money order or travelers checks are also acceptable if issued in U.S. dollars.
- Please inquire as to whether or not the bank will deduct a service charge. If the bank has a service charge, be prepared to pay the service charge as well as the full amount of your check.
- We regret that payments that are not in the proper form or have a service charge deducted will delay the processing of your application.

