

CONTACT INFORMATION						
Winery/vineyard	d name					
Employer Identi	ification Number (EIN)					
Is Worker's Compensation required of you in your state? (check one)						
Yes, Carrier		☐ No, Worker's Compensation coverage is not required				
Trainee/intern s	supervisor name	Title				
Supervisor's email address						
Qualifications	to supervise					
Physical address		Mailing address (if different)				
Primary phone		Alternate phone				
Fax						
Website URL	http://					
Please explain how trainees/interns can travel to the training site						



WINERY/VINEYARD INFORMATION							
Winery/vineyard size	acres						
Varietals produced							
Annual revenue range \$0–3 million \$3–10 million \$10–25 million \$25+ million Annual revenue range is required by the U.S. State Department.							
Please list ALL commodities produced on site (in addition to wine/grapes)							
Number of full-time er	nployees	Number of interns	expected	seasonal	year-round		
Trainee/intern pay rate	\$		per				
Expected program date	es		through				
Please list ALL equipment which trainees/interns will use (vehicles and machinery)							
What distinguishes your wine from others?							
Languages spoken on s	site						
We will accept							



Will trainee/intern need a driver license to perform necessary training?						
Country/nationality preferences or limitations						
We will accept someone who smokes cigarettes						
Please describe all daily tasks to be performed by trainees/interns						
Please describe any special techniques/skills to be imparted to the trainees/interns						
Please describe how trainees'/interns' performance will be evaluated throughout the program						
What plans are in place for trainees/interns to participate in American cultural activities?						
Why are you interested in hosting a trainee/intern with Worldwide Farmers Exchange?						



- We will provide appropriate practical training and cultural exchange to the trainee/intern assigned to us. Except in rare cases, a trainee/intern must have a minimum of one day each week free from training. If practical training exceeds 45 hours per week, the additional time must be agreed to in advance by the trainee/intern. In no event is training to exceed 60 hours per week. We will encourage and provide opportunities for cultural exchange by allowing adequate time and opportunity for the trainee/intern to obtain cultural experiences.
- We will assist the trainee/intern to find housing, which will be at the cost of the trainee/intern. Housing may be on or off our training site as long as there are reasonable transportation facilities available for the trainee/intern. The trainee/intern must have access to a telephone and internet, but telephone and internet use may be at the expense of the trainee/intern.
- We will place our trainee/intern on payroll, and we understand that trainees/interns are exempt by law from Social Security and Medicare deductions. With the permission of the trainee/intern, we will send a copy of the W-2 form to Worldwide Farmers Exchange by e-mail or mail.
- We agree that if a trainee/intern becomes ill or injured, we will help the trainee/intern obtain medical treatment. We understand that Worldwide Farmers Exchange provides medical insurance for its trainees/interns which covers both on and off the job illnesses and injuries. If we are required by our state to carry Workers' Compensation Insurance, we will cover our trainee/intern under our Workers' Compensation insurance policy.
- We will try to resolve any problems directly with the trainee/interns, but understand we may ask Worldwide Farmers Exchange's staff for assistance if we cannot resolve a problem. In an emergency, we may call the emergency number or leave a message at the Main Office.
- We agree to act as a host for a full program period (as described on our DS-7002 form), but we understand that Worldwide Farmers Exchange may remove a trainee/intern at any time if it is in the best interest of the trainee/intern or the Program.
- We agree to encourage the trainee/intern to complete the report(s) required by the U.S. State Department and will complete our portion of the report(s).
- We agree to review the Program Handbook and follow the rules set forth in it.
- By signing or typing my name in the Signature field below, I acknowledge that all of the information in my application is true and correct.

Signature	Date	
Printed name		