



J-1 PROFESSIONAL EXCHANGE PROGRAMS FEE DISCLOSURE

Applicant Last Name: _____

First Name: _____

Middle Name: _____

FEE DISCLOSURE

(fees that will be collected by the CIEE International Representative, CIEE or the U.S. Government)

Fee	Amount (Please specify currency: _____)	Inclusions
Program fee	Internship USA 1 month: _____ 2 months: _____ 3 months: _____ 4 months: _____ 5 months: _____ 6 months: _____ 7 months: _____ 8 months: _____ 9 months: _____ 10 months: _____ 11 months: _____ 12 months: _____ 13 months: _____ 14 months: _____ Career Training USA 1 month: _____ 2 months: _____ 3 months: _____ 4 months: _____ 5 months: _____ 6 months: _____ 7 months: _____ 8 months: _____ 9 months: _____ 10 months: _____ 11 months: _____ 12 months: _____ 13 months: _____ 14 months: _____ 15 months: _____ 16 months: _____ 17 months: _____ 18 months: _____ 19 months: _____ 20 months: _____	- Application fee - CIEE support pre-departure - CIEE in-country support - Orientation - Insurance Plan (for policy details visit www.ciee.org/insurance) - Screening for program - Administrative costs
SEVIS fee		- U.S. government administrative cost
Visa interview fee		- U.S. government administrative cost
Promotion		
Placement Fee		
Expedite fee		- Expedited forms and/or application review
Other services		
Total fees (excluding airfare, housing, & transportation)		
Flight (estimated cost)		- Round-trip airfare (this is the typical cost – actual price will depend on destination and dates selected)
Housing fee		- This is the typical cost – actual price will depend on location
Transportation fee		- This is the typical cost – actual price will depend on location

FEE DISCLOSURE

(Continued)

Cancellation and refund policy:

Other program costs and pricing notes:

PARTICIPANT FEE AGREEMENT

I verify that I was provided with a copy of the CIEE Internship USA & Career Training USA application, which includes the full terms and conditions for the program. I confirm that I have reviewed the complete pricing information in this document and fully understood the costs of the program before I paid a non-refundable deposit. I understand that stipends might not cover the entirety of program and living expenses and that I should have access to additional personal funds.

Except as specifically modified herein, the terms of the CIEE Internship USA & Career Training USA application I previously signed remain in full force and effect.

Name Printed: _____

Signature: _____

Date (MM/DD/YYYY): _____