International Educational Exchange, Inc.

Certification of No Restrictions to perform the Job Offered

I, _____, hereby certify that I have no physical, medical, or religious limitations that would restrict my ability to perform the essential functions of the position offered, including but not limited to serving alcohol, handling or serving pork products, exposure to chemicals, and fulfilling physical job requirements.

I acknowledge that my employer operates seven days a week and that I may be scheduled to work on any day of the week, including weekends. I confirm that I have no restrictions regarding the days of the week on which I may be scheduled to work.

Signature: _____ Date: _____