****  *One Stop Career Center Job Order Form***

AJC_LC_BannerLine_468x60 **Fax: 278-8587**

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The information you provide will assist us in locating the most qualified candidates for your needs. Please fill out **one** Job Order Form for **each** job title. To enter text on the form, click in the first **gray field** below and begin typing. **When you get to the outlined Check Mark squares, you can double click on square to “check” the box.**

**COMPANY INFORMATION**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Today’s Date:** |  | | **Federal ID** | | |  | | | | **(office use) Employer ID** | | | | |
| **Business Name:** |  | | | | | | | | | | | | | |
| **Address:** |  | | | | | | | | | | Would you like candidates to apply directly, without contacting the NYS Dept of Labor?  Yes-Unsuppressed = Co.name on internet  No-Suppressed = Candidate contact DOL | | | |
| **City** |  | | | | **State:** NY | | | | **Zip:** | |
| **Contact Person / Title:** |  | | | | | | **Telephone #:** | | | | | | **Fax #:** | |
| **URL Address** |  | | | | | | **Email:** | | | | | | | |
| **Methods to Apply:**  (Select all preferences) | **Email** | **On-Line** | | **Fax** | | | | **Telephone** | | | | **Mail** | | **In Person** |
| **Type of Business:** |  | | | | | | | | | | | | | |

**JOB INFORMATION**

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| **Job Title:** |  | | | | | | | | | | | | | **Job Location & Zip Code:** | | | | | |  | | | | | | | | | |
| **How Many Openings?** |  | | | Duration**:**  temporary  regular  seasonal | | | | | | | | | | | | | | | | | Full time  Part time | | | | | | | | **Hours per week:** |
| **Work days per week?**  ***(Check all that apply)*** |  | Mon | |  | Tues | | |  | | Wed | | |  | | Thur | | |  | | Fri |  | Sat | | | |  | Sun | |  |
| **What Shift(s)?** | First | | Second | | | | | Third | | | | | Varies | | | | | | Other | | | Explain: | | | | | | | |
| **Level of Education required?** | Less than HS | | | GED | | | High School | | | | Vocational Degree | | | | | Some College | | | | | Associate Degree | | | | | Bachelor Degree | | | Master Degree |
|  | Doctoral Degree/Ph.D. | | | | | | | | | | Licenses/Certificates/Degrees | | | | | | | | | | | | | | | | | | |
| **How many years Experience is required?** | Years:       Months: | | | | | | | | | | Acceptable related experience: | | | | | | | | | | | | | | Would you accept a trainee:  Yes  No | | | | |
| **Pay Range:** | Min. Pay $ | | | | | To Max. Pay | | | | | | $ | | | | | Starting pay is negotiable depending on experience.  Minimum pay to start; maximum eventually. | | | | | | | | | | | | |
| **Driver’s License**  ***(If required for job duties)*** | Yes  No | | **Class**: Regular (D)  OR  CDL A  B  C  E | | | | | | | | | | | | | | **Own Car** required for job:  Yes  No | | | | | | | On Bus Route  Yes  No | | | | Union Affiliation**:**  Yes  No | |
| **Benefits Available:**  **(*Check all that apply*)** | Health Insurance | | | | | | | | Holiday | | | | | | | | **Other pre-hire steps or requirements: (check all that apply)**  Own Tools | | | | | | Drug Screening | | | | | | |
|  | Dental Insurance | | | | | | | | Retirement/401k | | | | | | | |  | | | | | | Medical Exam | | | | | | |
|  | Vacation/PTO | | | | | | | | Clothing Allowance | | | | | | | |  | | | | | | Reference Check | | | | | | |
|  | Sick Time/PTO | | | | | | | | Child Care | | | | | | | |  | | | | | | Criminal Background Check | | | | | | |
| **Job Description:**  ***(Required)***  ***Your brief but detailed description will result in better qualified referrals!***  **(Attach company job description if available)** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |