



EMPLOYER JOB ORDER FORM

Business Services
1910 Carnegie Avenue
Cleveland, Ohio 44130
216.777.8200
ohiomeansjobs.com/cuyahoga

PLEASE EMAIL THIS FORM TO:
Anthony Fluellen: Director, Business Services
Email: Anthony.fluellen@ulagency.org
Phone: 216-777-8202

Date: _____

COMPANY INFORMATION	COMPANY NAME		FEDERAL TAX ID NUMBER			
	CONTACT NAME/TITLE		ADDRESS / CITY / ZIP CODE			
	PHONE NUMBER		FAX NUMBER	EMAIL ADDRESS		
	OWNERSHIP					
	<input type="checkbox"/> Federal		<input type="checkbox"/> State	<input type="checkbox"/> Local Government	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Limited Liability		<input type="checkbox"/> Non-Profit	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Association	<input type="checkbox"/> Private
EMPLOYER SECTOR			FEDERAL CONTRACTOR			
<input type="checkbox"/> Public for Profit <input type="checkbox"/> Government/not for profit <input type="checkbox"/> Private for profit			<input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> None <input type="checkbox"/> Both Federal & State			
INDUSTRY					Number of Employees _____	
<input type="checkbox"/> Healthcare or Medical		<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Service	<input type="checkbox"/> Trades		
<input type="checkbox"/> Banking, Finance, or Insurance		<input type="checkbox"/> Government	<input type="checkbox"/> Education	<input type="checkbox"/> Non-Profit		
COMPANY DESCRIPTION						

POSITION OR POSITIONS AVAILABLE	JOB TITLE		WORK ADDRESS		CITY	
	STATE	ZIPCODE	COUNTY	OPEN DATE	CLOSE DATE	MIN HRS/WEEK
						MAX HRS/WEEK
	MINIMUM SALARY		MAXIMUM SALARY	NO. OF OPENINGS	MAXIMUM NO. OF REFERRALS	SELECT ONE
	\$ PER		\$ PER			<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> SEAS <input type="checkbox"/> TEMP
	SELECT WORKDAYS				SELECT SHIFT(S)	
	<input type="checkbox"/> SUN <input type="checkbox"/> MON <input type="checkbox"/> TUE <input type="checkbox"/> WED <input type="checkbox"/> THU <input type="checkbox"/> FRI <input type="checkbox"/> SAT				<input type="checkbox"/> 1 ST <input type="checkbox"/> 2 ND <input type="checkbox"/> 3 RD <input type="checkbox"/> SPLIT <input type="checkbox"/> ROTATING	
	CHECK IF REQUIRED PRIOR TO HIRE FOR THIS POSITION: <input type="checkbox"/> Background Check <input type="checkbox"/> Drug Screen <input type="checkbox"/> Driver's License					
	JOB DESCRIPTION Please Attach the Job Description Separately in a Word Document.					
	BENEFITS					
<input type="checkbox"/> 401K		<input type="checkbox"/> Educational Assistance	<input type="checkbox"/> Childcare	<input type="checkbox"/> Dental	<input type="checkbox"/> Health Insurance	
<input type="checkbox"/> Paid Holidays		<input type="checkbox"/> Retirement Benefits	<input type="checkbox"/> Sick Leave	<input type="checkbox"/> Vacation	<input type="checkbox"/> No Benefits	
EMPLOYER CONTACT METHOD (For Jobseekers)						
<input type="checkbox"/> OMJ CC <input type="checkbox"/> In-person <input type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Mail <input type="checkbox"/> Email <input type="checkbox"/> Apply online						
PUBLIC DISCLOSURE						
<input type="checkbox"/> PARTIAL DISCLOSURE (Only job information shown--must contact OMJ CC)			<input type="checkbox"/> NON-DISCLOSURE (Only viewed by OMJ CC staff--not disclosed publicly)			

APPLICANT	DESIRED SKILLS (3-5 key skills sets required)	
	EXPERIENCE REQUIRED: <input type="checkbox"/> MONTHS <input type="checkbox"/> YRS.	MINIMUM EDUCATION REQUIRED: