## The Workforce Partnership

Representing the Town of Oyster Bay, Town of North Hempstead and City of Glen Cove Tel: (516)797-4560 - Fax: (516)797-4589

Employer: Please fill out ONE Job Order Form for EACH Job Title			Date:			
Company:						
Address:			City:			
State:	Zip Code:	Phone:		Fax:		
Contact Person:			Title:			
Product/Service:						
Job Title To Be Filled:						
# of Job Openings:	# of Persons You Wish To Interview:		Worksite Location:			
Referral Instructions: C Fax	○ Mail	○ E-Mail	Call Prior To Se	ending		
Requirements						
Years of Education Needed:	Specialized Ed	ucation? (List Degree Neede	ed):			
Years of Experience Required: Professional Certification/License Needed:						
Will You Accept Related Experience	? O Yes O No	If Yes, Specify:				
○ Regular ○ Temporary	From/To(Dates):			Full Time P	art Time	
Hours (From/To):	Work Days:	○Su ○Mo ○Tu	○We ○Th ○Fr ○	Sa Overtime	? O Yes	○ No
Salary Range:	Per \( \) Hour	○ Day ○ Week (	Month Annual	Negotiable? (	Yes ON	No
Job Duties/Skills Please describe specific skills	and duties:					
Other Requirements Yes	s No		Ben	efits	Yes	No
Drivers License?	Class?		He	alth Insurance?		
Own Tools?			Life	e Insurance?		
Employment/Security Test?	Name?		De	ntal Insurance?		
Physical Exam?			Pai	id Vacation?		
Must Join Union?			Pai	id Sick Leave?		
Bondable?			Ret	tirement Plan?		
To have Job Order posted on Lo	ong Island Central Job Ba	ank, the following info	ormation must be suppl	ied:		
Employer Tax ID No.		Does your company have Department of Labor (FC.	a Federal Contract requir JL)? Yes	ing job openings to b	e listed with	n the

For questions regarding this form, please contact Maryanne Sandt at (516)797-7860 or via email: msandt@oysterbay-ny.gov