

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Employment Administration

JOB ORDER

By submitting a job order, you agree to your company's information being shared with the Direct Employers Association.

(Please be as detailed as possible)

Federal Employer Identification No. (FEIN): _____

Employer/Company Name: _____ E-mail Address: _____

Address (No., Street): _____

City: _____ State: _____ Zip: _____

Contact Person (First and Last Name): _____

Phone No. : _____ Fax No.: _____ Other : _____

Type of Business: _____ Job Location: _____

Position Title: _____ Number of Openings: _____

Experience Required (Months/Years): _____ Number of Hours Per Week: _____ Overtime Possible? Yes No

Permanent or Temporary (How

Is Position Considered (Check one): long?): _____

Education Requirements (Years, diplomas, certifications): _____

Description of Job Duties (Work performed, equipment, etc.): _____

Minimum Qualifications

Will there be On the Job Training? Yes No

Do you require a valid driver's license? Yes No CDL Class: A B Hazmat

Transportation Provided? Yes No

How to apply: Call for Appointment Mail Resume Fax Resume

Apply in Person (Days and Hours): _____ Other: _____

Do you require: Background Check? Drug Testing? References?

Days and Hours to be Worked: _____

Salary: _____ DOE: _____ Benefits: _____

DOES YOUR COMPANY HAVE ANY CONTRACTS WITH THE FEDERAL GOVERNMENT? Yes No

BROADCAST ORDER: Yes No Does your company potentially plan to file an H-2B application? Yes No

BROADCAST is defined as Disclosure Type. You may select:

- 1) **Public** – Potential employees will see all job information, including all contact information.
- 2) **Public Limited** – Potential employees will see all job information except company information. They can respond to your ad through a confidential link provide to them.
- 3) **Private** – Job does not display to the potential employees but is available to AZ Job Connection.

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. Auxiliary aids and services are available upon request to individuals with disabilities. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To

request this document in alternative format or for further information about this policy, contact your local office manager; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request.