



COUNTY OF MERCER
One-Stop Career Center
Workforce Investment Board
www.mercercounty.org/one_stop



Brian M. Hughes
County Executive

JOB ORDER REQUEST
Employer Information

Date Submitted:			
Company Name:	Federal Employment ID# (FEIN) (REQUIRED):		
Street:			
City:	State:	Zip:	
Contact name:	Title:		
Phone:	Ext.:	Fax:	
Email:	Website:		

Would your company like to receive information on the following:

Hiring Veterans? Yes No

Federal Bonding Program? Yes No

On the Job Training (OJT) Yes No *(This program pays up to 50% of an eligible employee's wages for up to 6 months.)*

Company Benefits:

Health Dental 401k/Pension Paid Vacation Paid Sick Time

Required Tests:

Drug/Alcohol Criminal Background Physical Credit Other

How Should Job Seekers Apply?

Walk-In Apply on Website Fax Resume
 Mail Resume Email Resume Call for Appointment

Contact name:	Title:		
Phone:	Ext.:	Fax:	
Email:			

Job Site (If different from above):

Company Name:			
Street:			
City:	State:	Zip:	

Please fax or email this form to **Kassia Switlik Bukosky**
Email: kbukosky@mercercounty.org Fax: 609-292-8915 Phone: 609-989-6201

JOB ORDER REQUEST

Job Detail

Job Title:	
Job Description (You may attach your job description separately. Please complete in as much detail as possible):	
Experience Desired (years, background, skills):	
Number Of Job Openings:	Starting Salary: (Hr / Yr)

Education:

- | | | | |
|--|---|--------------------------------------|--|
| <input type="checkbox"/> Less Than HS Acceptable | <input type="checkbox"/> HS Diploma/GED | <input type="checkbox"/> Voc. Degree | <input type="checkbox"/> AA |
| <input type="checkbox"/> BA/BS | <input type="checkbox"/> MA/MS | <input type="checkbox"/> PhD | <input type="checkbox"/> Certification
Specify: _____ |

Shift (Check all that apply):

- | | | |
|---|--|--|
| <input type="checkbox"/> Days/1 st Shift | <input type="checkbox"/> 2 nd Shift | <input type="checkbox"/> 3 rd Shift |
| <input type="checkbox"/> Split | <input type="checkbox"/> Rotating | <input type="checkbox"/> Varies |

Hours of Operation: _____ Days: M T W Th F Sat Sun

Public Transportation Available: Yes No Bus Route: _____

Duration:

- | | |
|---|--|
| <input type="checkbox"/> Full Time | <input type="checkbox"/> Part Time |
| <input type="checkbox"/> Seasonal/Temporary | <i>If seasonal/temp, from _____ to _____</i> |

All jobs will be posted internally as well as on wnjpin.net for 60 days.