

Complete the form below and then click on the button on the right that you would like the job order to go to. A staff member will respond within 2 business days.

Employer Registration						
Company Name:			FEIN: (Sunbiz.org)		<input type="checkbox"/> EF Record Exists	
Mailing Address:						
City:		State:		Zip:		
Employer Contact						
First Name:		Last Name:		Title:		
Primary Phone:		Secondary Phone:		Fax:		
Email:		Preferred Method of Contact:				
Employer Web Site:			Job Application Web Site:			
Industry Title (NAICS):			Number of Employees:			
Type of Employer:	<input type="checkbox"/> Private	<input type="checkbox"/> Gov.:	Fed	State	Local	<input type="checkbox"/> Non-Profit
						<input type="checkbox"/> Ed.: K-12 or Higher
Job Order Summary						
<input type="checkbox"/> New		<input type="checkbox"/> Revision		JO Number:		Revision Date:
Job Title:				Occupation/ONET Code:		
Worksite Location:						
City:		State:		Zip:		
Job Contact:						
First Name:		Last Name:		Title:		
Primary Phone:		Sec. Phone:		Fax:		Email:
Job Order Info to be Displayed Online: (select one)						
Display on line to Job Seekers		<input type="checkbox"/> Yes		<input type="checkbox"/> No		
If Yes:		<input type="checkbox"/> Display Company Name		<input type="checkbox"/> CareerSource Staff Screen Applicants		
Number of Positions:						
Earliest Display Date:		Last Display Date:		Anticipated Hire Date:		
Type of Job:	<input type="checkbox"/> Regular	<input type="checkbox"/> Temporary	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Contract	<input type="checkbox"/> Volunteer	
Full or Part-Time:	<input type="checkbox"/> FT = or > 30	<input type="checkbox"/> PT < 30	<input type="checkbox"/> FT and PT	<input type="checkbox"/> PRN	<input type="checkbox"/> Not Selected	
Anticipated Job Duration:	<input type="checkbox"/> > 150 Days		<input type="checkbox"/> 4 –150 Days	<input type="checkbox"/> 1 – 3 Days	<input type="checkbox"/> Not Selected	
Special Category:	<input type="checkbox"/> Internship		<input type="checkbox"/> On the Job Training (OJT)		<input type="checkbox"/> NA	
Maximum Number of Applicants:						
Job Title:						
Job Description: (If available, attach employer job description.)						
Skills Associated with Occupation:						
Special Software / Hardware Skills Needed:						
Other Specific Skills Required:						
Hiring Requirements:						
<input type="checkbox"/> Drug Screening		<input type="checkbox"/> Background Check		<input type="checkbox"/> Credit Check		<input type="checkbox"/> Reference Check
<input type="checkbox"/> Bonding		<input type="checkbox"/> Motor Vehicle Record		<input type="checkbox"/> Other: (specify)		
Testing / Assessment Requirements:						

Minimum Education:		Minimum Months of Experience:						
Accessible by Public Transportation:	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
Driver's License Requirements:	<input type="checkbox"/> Operators Class E		<input type="checkbox"/> Motorcycle			<input type="checkbox"/> NA		
	<input type="checkbox"/> Commercial:		<input type="checkbox"/> A		<input type="checkbox"/> B		<input type="checkbox"/> C	
	<input type="checkbox"/> CDL Endorsements:		<input type="checkbox"/> T	<input type="checkbox"/> P	<input type="checkbox"/> N	<input type="checkbox"/> H	<input type="checkbox"/> X	<input type="checkbox"/> K
Compensation & Hours								
Minimum Salary:		Maximum Salary:			Basis of Salary /Pay:			
Pay Comments:								
Supplement Compensation:		<input type="checkbox"/> Yes	<input type="checkbox"/> No		Hours per Week:		Shift:	
Benefits Offered:								
<input type="checkbox"/> Medical	<input type="checkbox"/> Holiday		<input type="checkbox"/> Stock Options		<input type="checkbox"/> Profit Sharing			
<input type="checkbox"/> Dental	<input type="checkbox"/> Sick Leave		<input type="checkbox"/> Retirement / Pension		<input type="checkbox"/> Extended Sick Leave			
<input type="checkbox"/> Life Insurance	<input type="checkbox"/> Tuition Assistance		<input type="checkbox"/> Relocation Assistance		<input type="checkbox"/> Flexible Benefit Account			
<input type="checkbox"/> Vision	<input type="checkbox"/> Job Share		<input type="checkbox"/> Uniform Allowance		<input type="checkbox"/> Travel Allowance			
<input type="checkbox"/> Childcare	<input type="checkbox"/> Flex-Time		<input type="checkbox"/> Company Vehicle		<input type="checkbox"/> Other:			
<input type="checkbox"/> Vacation	<input type="checkbox"/> 401K		<input type="checkbox"/> Expense Account		<input type="checkbox"/> None			
Description of Other Benefits Offered:								
Job Application Methods								
<input type="checkbox"/> Provide an EFM Application Online				<input type="checkbox"/> VIA Email (Contact):				
<input type="checkbox"/> By Phone:				<input type="checkbox"/> By Fax:				
<input type="checkbox"/> VIA Employer Web Site:								
<input type="checkbox"/> By Mail (Mailing Address):								
<input type="checkbox"/> In Person (Address):								
Description of the Application Process:								
Job Application Information Needed								
<input type="checkbox"/> Employment History		<input type="checkbox"/> Education History			<input type="checkbox"/> Certifications/Licenses			
<input type="checkbox"/> Other Application Info:								
Job Applicant Question Set								
Question One:								
Question Two:								
Question Three:								
Question Four:								
Notification of Job Seeker Application:		<input type="checkbox"/> Yes		<input type="checkbox"/> No				
Would you like to upload this Job to:		<input type="checkbox"/> None			<input type="checkbox"/> Employ Florida		<input type="checkbox"/> US Jobs	
Other Information:								
Veterans Preference Given:		<input type="checkbox"/> Yes	<input type="checkbox"/> No		Green Job:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Federal Contractor:		<input type="checkbox"/> Yes	<input type="checkbox"/> No		Affirmative Acton Plan Required:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Security Clearance Required:		<input type="checkbox"/> Yes	<input type="checkbox"/> No		Enterprise Zone Job:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Connected to a DOL application; H2B, temp non-agricultural, guest workers in the US:						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Account Executive Notes: Account Ex. Initials Date:								

I hereby give CareerSource Southwest Florida (CSSWF) staff permission to post my job order in Employ Florida.
Employer name: _____ Signature: _____ Date: _____
Print Name