

TRIDENT

Need workers? Email, Fax, or Mail a detailed Job Description. Please take a moment to complete the information below. It will help us during the screening process. Contact us if you have any questions or comments.

Employer Information

Company Name		Street Address		UI Acct # or Fed ID #	
City		State	Zip Code	Telephone	
Company doing business as:			Mailing address		
Are you a federal contractor? Yes <input type="checkbox"/> No <input type="checkbox"/>		Number of employees	Web Address		Worksite Location
E-Mail Address:		Contact Person:		Fax #:	
Is this listed pursuant to an affirmative action Plan? Yes <input type="checkbox"/> No <input type="checkbox"/> or self employment or working on a contract basis? Yes <input type="checkbox"/> No <input type="checkbox"/>					

Supplement Information

Job Title	No. of openings	Job Duration, F/T <input type="checkbox"/> P/T <input type="checkbox"/>	Work Hours / Shifts	Total Hrs / Week
Work Days (i.e. Mon-Fri) S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> T <input type="checkbox"/> F <input type="checkbox"/> S <input type="checkbox"/>	Driver's License Required. Yes <input type="checkbox"/> No <input type="checkbox"/>	Driver License Class A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> M <input type="checkbox"/>	Endorsements: H <input type="checkbox"/> N <input type="checkbox"/> P <input type="checkbox"/> T <input type="checkbox"/> X <input type="checkbox"/>	
Drug Screening Required: Yes <input type="checkbox"/> No <input type="checkbox"/>	Background Check Required: Yes <input type="checkbox"/> No <input type="checkbox"/>	Credit Check Required: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Salary Information: \$ _____ Per (check one) Hr. <input type="checkbox"/> , Wk. <input type="checkbox"/> , Mo. <input type="checkbox"/> , Yr. <input type="checkbox"/> , Comm., <input type="checkbox"/> , Other (specify) _____				
Education Requirements: High School Graduate/GED <input type="checkbox"/> , Some College <input type="checkbox"/> , Degree <input type="checkbox"/> (specify) _____ Associate Degree <input type="checkbox"/> , 4 Year Degree <input type="checkbox"/> , Advanced Degree <input type="checkbox"/> , (specify) _____				
Benefits: 401k <input type="checkbox"/> , Mileage Reimbursement <input type="checkbox"/> , Medical <input type="checkbox"/> , Retirement <input type="checkbox"/> , Other (specific) _____				
Experience: NONE <input type="checkbox"/> , Less than 1 year <input type="checkbox"/> , 1-3 years <input type="checkbox"/> , 3-5 years <input type="checkbox"/> , 5+ years <input type="checkbox"/>				
Work keys Requirements: Has this position been profiled? Yes <input type="checkbox"/> No <input type="checkbox"/>				
How Do Applicants Apply? <input type="checkbox"/> Mail or fax resume, with cover letter, FAX resume (____) ____-____. <input type="checkbox"/> Call for Appointment: (____) ____-____, what times are best? (TIME) ____ and ____. <input type="checkbox"/> Apply in person between (TIME) ____ and ____. <input type="checkbox"/> Other referral instructions: _____				
Description and Duties: (Attach detailed job description in word format.) Include any licensing or special certifications. Please include machinery or tools used, typing requirements, computer software, etc. (Note: type in the shaded area and the lines will wrap around for about ten lines.) <div style="border: 1px solid black; height: 100px; width: 100%;"></div>				