

EMPLOYER JOB POSTING QUESTIONNAIRE

First Name:	Last Name:
Phone:	Company Name:
Email:	Website:
Address:	City, State, Zip:
Preferred Method of Contact: (circle one) Em	ail Phone
How Did You Hear About Us?	
JOB POSTING INFORMATION: 1. Job Title:	
Job Type (circle one): Full-Time Part-	
3. Schedule/Hours:	
4. Education/Training/Certification Required	d:
5. Years of Experience Required:	
6. Computer Skills/Software Required:	
7. Language Skills Required:	
8. Pay Scale/Salary Range:	
9. Do you offer employer benefits? Yes N	No
If yes, what type?	
10. Application materials required: Resume	Cover Letter Letter(s) of Reference Portfolio
11. Preferred application method and point of	of contact:

> If applicable, please attach or submit a job description.