



State of Utah
Department of Workforce Services
JOB ORDER FORM
4 Ways to Submit a JOB ORDER

- Online: **jobs.utah.gov**
- E-mail: **postajob@utah.gov**
- FAX: 1-866-968-0060
- Phone: 1-888-920-WORK (9675)

◆ **EMPLOYER INFORMATION**

COMPANY NAME: _____ CONTACT PERSON: _____
STREET ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE NUMBER: (____)____-_____
FAX NUMBER: (____)____-_____ FEDERAL ID# (FEIN): _____
EMAIL ADDRESS: _____ UT EMPLOYER TAX ID# (UI ID): _____
FEDERAL CONTRACTOR (FCJL): Yes ☐ No ☐ AFFIRMATIVE ACTION EMPLOYER: Yes ☐ No ☐
JOB SITE LOCATION: _____

◆ **JOB TITLE:** _____ **NUMBER OF OPENINGS:** _____

JOB DESCRIPTION (Include tasks, duties, responsibilities): _____

◆ **JOB DETAILS:**

SALARY: From \$_____ To \$_____ (Hourly/Monthly/Yearly) BENEFITS: Yes ☐ No ☐
HOURS: From _____ (am/pm) To _____ (am/pm)
SHIFTS (check all that apply): Day ☐ Swing ☐ Graveyard ☐ Rotating ☐
WORK: Full-Time ☐ Part-Time ☐ Seasonal ☐ Temporary ☐
DAYS OFF: Sat ☐ Sun ☐ Mon ☐ Tues ☐ Wed ☐ Thurs ☐ Fri ☐

◆ **JOB REQUIREMENTS** (Must be bona fide qualifications required to perform the job.)

EXPERIENCE (Years/Months): _____ AGE: _____ to _____
IS VEHICLE REQUIRED? Yes ☐ No ☐ LIFTING (lbs.): _____
DRIVER'S LICENSE: Yes ☐ No ☐ LICENSE TYPE: **A / B / C / D** ENDORSEMENTS: **H / N / T / X / P**
EDUCATION: None ☐ GED ☐ HS ☐ AA ☐ BA/BS ☐ MA/MS ☐ PhD ☐ Cert./Lic. ☐
COMPUTER SKILLS/KNOWLEDGE: _____

SPECIAL MACHINERY/TOOLS/KNOWLEDGE: _____

ADDITIONAL INFORMATION / CLOSING DATE (If applicable): _____

REFERRAL INSTRUCTIONS (How would you like applicants to apply?): _____

Would you like information about Tax Credits for hiring special populations? ☐ Yes ☐ No

Equal Opportunity Employer Program

Auxiliary aids and services are available upon request to individuals with disabilities by calling (801) 526-9240. Individuals with speech and/or hearing impairments may call Relay Utah by dialing 711. Spanish Relay Utah: 1-888-346-3162