

ARIZONA DEPARTMENT OF ECONOMIC SECURITY  
Employment Administration

**JOB ORDER**

By submitting a job order, you agree to your company's information being shared with the Direct Employers Association.

*(Please be as detailed as possible)*

Federal Employer Identification No. (FEIN): \_\_\_\_\_

Employer/Company Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Address (No., Street): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person (First and Last Name): \_\_\_\_\_

Phone No. : \_\_\_\_\_ Fax No.: \_\_\_\_\_ Other : \_\_\_\_\_

Type of Business: \_\_\_\_\_ Job Location: \_\_\_\_\_

Position Title: \_\_\_\_\_ Number of Openings: \_\_\_\_\_

Experience Required (Months/Years): \_\_\_\_\_ Number of Hours Per Week: \_\_\_\_\_ Overtime Possible?  Yes  No  
 Permanent or  Temporary (How

Is Position Considered (Check one): long?): \_\_\_\_\_

Education Requirements (Years, diplomas, certifications): \_\_\_\_\_

Description of Job Duties (Work performed, equipment, etc.): \_\_\_\_\_

**Minimum Qualifications**

Will there be On the Job Training?  Yes  No

Do you require a valid driver's license?  Yes  No CDL Class:  A  B  Hazmat

Transportation Provided?  Yes  No

How to apply:  Call for Appointment  Mail Resume  Fax Resume

Apply in Person (Days and Hours): \_\_\_\_\_  Other: \_\_\_\_\_

Do you require:  Background Check?  Drug Testing?  References?

Days and Hours to be Worked: \_\_\_\_\_

Salary: \_\_\_\_\_ DOE: \_\_\_\_\_ Benefits: \_\_\_\_\_

DOES YOUR COMPANY HAVE ANY CONTRACTS WITH THE FEDERAL GOVERNMENT?  Yes  No

BROADCAST ORDER:  Yes  No Does your company potentially plan to file an H-2B application?  Yes  No

**BROADCAST is defined as Disclosure Type. You may select:**

- 1) **Public** – Potential employees will see all job information, including all contact information.
- 2) **Public Limited** – Potential employees will see all job information except company information. They can respond to your ad through a confidential link provide to them.
- 3) **Private** – Job does not display to the potential employees but is available to AZ Job Connection.

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. Auxiliary aids and services are available upon request to individuals with disabilities. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To

request this document in alternative format or for further information about this policy, contact your local office manager; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request.