Davis Technical Staffing & Consulting, LLC
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JOB ORDER FORM

CLIENT INFORMATION

Date: _____

Company: _____

Phone: _____ **Ext:** _____ **Fax:** _____

Contact Person: _____ **Title:** _____

Email: _____

POSITION INFORMATION

Job Title: _____ **How many positions?** _____

Job Description (use separate sheet if necessary):_____

_____

_____

_____

Responsibilities/Skills (use separate sheet if necessary): _____

_____

_____

Check One: **Contract** ◯ **Permanent** ◯ **Temp** ◯

Start Date: _____ **End Date:** _____ **Work Hours** _____ **to** _____

Salary: **$** _____**/ hour**__ **(max)**

Candidate will report to: _____ **Title:** _____

Location of job: _____

Is this project under the Davis-Bacon Act? YES ◯ **NO** ◯

Is this project under the Livable Wage Act? YES ◯ **NO** ◯

Education required: _____ **Age restrictions?** _____

Check All That Apply: *Drug Test? ◯ ***Background Check?** ◯ ***Driver's License?** ◯

Approved by: _____ Title: _____ Date: _____