



First Source Providence

Job Vacancy Information Form

Employer Information:

Company Name: _____

Address: _____ City/State: _____ Zip Code: _____

Primary Contact person/Title _____ Email address: _____

Telephone: _____ Fax: _____

Secondary Contact person/Title _____ Email address: _____

Telephone: _____ Fax: _____

Job Title: _____ FT _____ PT _____ Temporary _____ Number of Openings: _____

Date Open: _____ Closing Date: _____

Rate of pay (annual or hourly salary): \$ _____ Does the position have benefits? _____

New _____ Replacement _____

Please describe Typical Job Duties OR Attach a Job Description: _____

Required Experience, Skills and Education: _____

Work Schedule: (days/shift/weekends) _____

How would you like job applicants referred to you? (Check One Below):

- ☐ Email resumes of top _____ candidates
- ☐ Fax resumes of top _____ candidates
- ☐ Provide candidate names and phone numbers to you
- ☐ Have candidates apply directly with you
- ☐ Have candidates call you directly

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