



Job Fair Employer Form

Name:	Title:	
Company/Organization:		
Address, City, State, Zip:		
Email:	Phone:	
Exhibitor Team Members		
1.	2.	
3.	4.	
What types of jobs do you offer (ch	eck the appropriate	Additional notes for us to track what area employers offer for employees
boxes): Full Time	Part-Time	and how we can connect your business in the future:
Summer Only	Year Long	Do you offer job shadows and/or internships?
What industry is your business in?		Yes No
Special Requirements (Tables/chairs provided and limited electricity will be available):		Do you offer apprenticeships? Yes No
		Do you help pay for training/education?
lembers: \$85 Non-Member	rs: \$110	Yes No
ayment information:	Check	(enclosed) Credit Card:
VISA American Express	Mastercard Disc	cover
ame on card:	Card #:	
xpiration: CSC:	Billing zip code:	