

FPCM Work Ops - helping others, help themselves

Work Opportunities List Submission Form

Job Title: _____

Job Type: Full Time: _____ Part Time: _____ Volunteer: _____ Temporary: _____

Job Description: _____

Employer: _____

Employer Contact Information:

Address: _____

Phone: _____ Fax: _____

Email: _____

Submitted by: _____

Submission Date: _____

Expiration Date: _____

I, _____, am submitting this Job Listing as a legitimate representative of the listed Employer and take responsibility for the accuracy and validity of the listing.

Signature: _____

Please print, sign, and submit this form to the church office.

-----*For Office Use Only*-----

Listing ID #: _____

Placement: Bulletin _____ Newsletter _____ Web _____

Comments: _____
