

Domestic or Household Employees: Job Description Form

An Employment Agency must give a completed Job Description Form with all of the information below to every job applicant the Agency refers to a position as a Domestic or Household Employee.

Date ____/____/____

Amount of Fee \$ _____

Employment Agency Information	
Name of Employment Agency _____	
Name of Agency Staff or Salesperson _____	
Telephone Number _____	DCA License Number _____
Address _____	
E-mail Address, if available _____	

Job Information	
Name of Employer _____	
Telephone Number _____	Email Address _____
Address _____	
Hourly Pay Rate \$ _____ (minimum wage \$ _____/hour)	Employer will provide (<i>check box that applies</i>):
Lodging: <input type="checkbox"/> Live In <input type="checkbox"/> Live Out	<input type="checkbox"/> No meals <input type="checkbox"/> One meal per working day <input type="checkbox"/> Two meals per working day <input type="checkbox"/> Three meals per working day
Start Date ____/____/____	_____ Hours/Day
Employment Status (<i>check all that apply</i>):	Weekly Schedule (<i>check all that apply</i>):
<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time <input type="checkbox"/> Temporary <input type="checkbox"/> Permanent	<input type="checkbox"/> Monday <input type="checkbox"/> Friday <input type="checkbox"/> Tuesday <input type="checkbox"/> Saturday <input type="checkbox"/> Wednesday <input type="checkbox"/> Sunday <input type="checkbox"/> Thursday
Description of Duties _____	

