

WORKER REQUEST FORM

For projects subject to the Workforce Training & Hiring Program

To the Contractor:

Please complete and send this form, when requesting workers to fulfill all hiring requirements for this project. A copy of the form must be sent to the Compliance Specialist assigned to the project.

| | | | | |
|-----------------------|--|--------------------------|--|---------------|
| To: | | | | |
| From: | | Phone: | | Email: |
| Business Name: | | Business Address: | | |
| Project Name: | | | | |

Worker Request

I am a contractor on a City of Portland Project, which falls under the Workforce Training and Hiring Program. This project requires me to make reasonable and necessary efforts to employ a diverse workforce and achieve the 18% minority and 9% female goals established by the City. I am using this form to request a worker(s) for employment with my company. Therefore, please refer ethnic minorities and women, for my consideration.

| | | | |
|--|---|--------------------------------|--|
| Number/Level of Workers Needed: | | Apprentice | Journey Level |
| Trade/Occupation: | | Job Site Location: | |
| Work Starts: | | Expected Length of Employment: | |
| Please provide a brief description of the Job Requirements: | | | |
| This job requires: | Driver's License Hard Hat Minimum Age Section 3 Resident | Physical Exam Gloves | Union Membership Hard-toed boots Drug Test |
| | | | Background Check Minimum Education Other |
| Duties (list the actual tasks that the employee will perform on the job: | | | |
| Hours per Week: | Full Time | Part Time | |

TO BE FILLED OUT BY REFERRING PARTY:

Please complete this section and send back to the requesting Contractor with a copy to the City of Portland, Workforce Program Manager at Cathleen.Massier@portlandoregon.gov or 503.865.3455.

We were able to dispatch a worker meeting the guidelines above:

Name of worker(s):

Name of worker(s):

Name of worker(s):

We were unable to dispatch a worker meeting the guidelines above.