

Job Title _____

Organization Name _____

Website Address _____

Address _____

City

State

Zip Code

Contact Person _____ Title _____

E-mail _____ Phone (_____) _____ Fax (_____) _____

Compensation: \$ _____ Per Year Hour Week Month Stipend Other _____

What kind of position? (*Check all that apply*) Professional Summer Student Employment

Job Description and Requirements: (*attach additional sheet if necessary*) _____

How would you like candidates to apply? (*Check all that apply.*)

E-mail
 Mail

Phone
 Fax

Website

What contact information would you like to be listed on your posting for candidates to see? (*Check all that apply.*)

E-mail
 Mail

Phone
 Fax

Website

Number of positions available: _____

Post this position: Always active (ongoing) 30 days 60 days _____ days Until deadline: _____

SUBMIT COMPLETED FORM TO:



Career Development Office
State University of New York at Fredonia
Fredonia, New York 14063

Fax: (716) 673-3593
E-mail: careers@fredonia.edu

Questions?

Phone: (716) 673-3327
Website: www.fredonia.edu/cdo