This form can be used to list job openings with the SUNY ESF JLD Program. Please provide the requested information and mail, fax, or e-mail the form to the following address:

Job Location & Development Program  
Financial Aid Office, 113 Bray Hall  
SUNY College of Environmental Science and Forestry  
1 Forestry Drive, Syracuse, NY 13210  
Fax (315) 470-4734, E-mail mjhill@esf.edu

Part 1 – Please indicate which services you would like to request.

☐ Please hold this listing in the JLD Program Position Database, which is available for review by interested students.

☐ Please list this position on the Job Locator web site (www.esf.edu/students/financial/jld).

☐ Please post a flyer for this position on the JLD bulletin board. The program can create simple flyers for your position or you can attach your own.

☐ Please e-mail this listing to students who are seeking employment and/or listed in the JLD Program Student Database.

Part 2 – Please indicate the duration of your listing.

Listings will remain active until the end of the indicated term or until we are notified that the position is closed. If no end date is indicated the listing will remain active until the end of the first academic session following the start date.

Start Date: ___________  End Date:  ■ Fall 200_  ■ Spring 200_  ■ Summer 200_

Part 3 – Please provide contact information.

Name: ___________________________  Title: _______________________________

Department: _____________________  Company: _______________________

Address: _________________________

City: ___________________  State: ______  Zip: ______________

E-mail: _________________________  Phone: ( ) -  Fax: ( ) -
Part 4 – Please describe your available position.

Position: 

Avg. Hours/Week: _____________________ Wage Rate: _____________________

Job Description: __________________________________________________________

________________________________________________________________________

________________________________________________________________________

Job Requirements: _________________________________________________________

________________________________________________________________________

________________________________________________________________________

Duration of Employment: Start Date: ___________ End Date: _________________

Location(s): ______________________________________________________________

Additional Comments: ____________________________________________________

________________________________________________________________________

________________________________________________________________________

Part 5 – Please sign the request form.

As a participant in the SUNY ESF Job Location and Development Program, I understand that:

➢ The employer is responsible for all wages, hiring decisions, and compliance with employment regulations.

➢ The employer is under no obligation to hire students referred through the JLD Program.

Signature: ___________________________ Date: ___________________________