

Job Referral Service

JOB ORDER FORM

Date: _____

CONTRACTOR INFORMATION:

Contract Number: _____

Contractor: _____

Contact Name: _____

Phone: () _____

Fax: () _____

E-mail: _____

JOB ORDER INFORMATION:

NOC: _____ Job Title: _____

of Positions: _____ Union: _____

Job Duration: _____ Days / Weeks / Months Shift: Day Night

Start Date: _____

JOB DESCRIPTION: (Attach appropriate Job Order Profile.)

COMMENTS:	
-----------	--

MFA Office Use Only				
Job Order Type: <input type="checkbox"/> Equity (Sequence 1) <input type="checkbox"/> Regular (Sequence 2)				
Matching Type:				
	# of Positions	Date	JRS JO #	JRS Status
JRS Equity				
JRS Non Equity				
Union				

Please **fax** this job order form and the job profile to the **Manitoba Floodway Authority** at **204-948-2462**.
If you have any questions about this job order, please contact the **PMA Team** at **204-945-3673** or **1-866-356-6355 (toll-free)**.