



PARTICIPANT JOB DESCRIPTION

Complete one form for each proposed job title. Description must be complete and thorough.

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|----------------------|------------------------------------|
| 1. Job Title: _____ | 2. Contracted Sub Recipient: _____ |
| 3. Worksite: _____ | 4. Work Address: _____ |
| 5. Supervisor: _____ | 6. Hours Per Week: _____ |
| 7. Work Days: _____ | 8. Start/End Date: _____ |

Job Duties: Describe the specific work tasks (attach job description or use an additional sheet if necessary).

Specific Skills/Method of Teaching Skills:

Method of Evaluating Skill Acquisition (Use Employ Milwaukee Evaluation Templates in addition to your own Evaluation Tools):

Job Qualifications:

Tools and Equipment Used: