

Domestic or Household Employees: Job Description Form

An Employment Agency must give a completed Job Description Form with all of the information below to every job applicant the Agency refers to a position as a Domestic or Household Employee.

Date: ____/____/____

Amount of Fee \$ ____

Employment Agency Information

Name of Employment Agency _____

Name of Agency Staff or Salesperson _____

Telephone Number _____ DCWP License Number _____

Address _____

Email Address, if available _____

Job Information

Name of Employer _____

Telephone Number _____ Email Address _____

Address _____

Hourly Pay Rate \$ _____
(minimum wage \$ _____ / hour)

Employer will provide (*check box that applies*):

Lodging:

☐ Live In

☐ Live Out

☐ No meals

☐ One meal per working day

☐ Two meals per working day

☐ Three meals per working day

Start Date ____/____/____

____ Hours/Day

Employment Status (*check all that apply*):

☐ Part-time

☐ Full-time

☐ Temporary

☐ Permanent

Weekly Schedule (*check all that apply*):

☐ Monday

☐ Friday

☐ Tuesday

☐ Saturday

☐ Wednesday

☐ Sunday

☐ Thursday

Description of Duties

