**EMPLOYER REGISTRATION FORM**



**2016 JERSEY UNDERGRADUATE INTERNSHIP**

**Your logo (this will be featured on the downloadable job description):**

**Job title:**

|  |
| --- |
| **Brief outline of the role (around 30 words):** |

|  |
| --- |
| **Key tasks and responsibilities:** |

|  |
| --- |
| **Desired skills and experience:** |

|  |
| --- |
| **Additional information (i.e. latest application dates etc.)** |

**Contact Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Contact Name: |  | | | |
| Business Name: |  | | | |
| Business Address: |  | | | |
| Telephone: |  | Mobile: |  | |
| Email: |  | | | |
| Website: |  | | | |
| Nature of Business: |  | | | |
|  |  | | | |
| Placement dates: (preferred start and end dates) |  | Working hours: | |  |
| Salary details | **Add to website / Do not add to website**  *(please state your preference)* | | | |

**Continued on page 2 …..**

Please complete and send to [s.walsh@gov.je](mailto:s.walsh@gov.je). Details of your internship will then be added to the Undergraduate Internship page of the States of Jersey website, with the exception of the information in the grey boxes.

|  |  |  |  |
| --- | --- | --- | --- |
| **Did you register for the 2015 Scheme?** | Yes/No | **Did you employ an intern(s) as part of the 2015 Scheme?** | Yes/No |
| **What was the position(s) offered?** | | | |
| **If applicable, would you be interested in having the same intern(s) as in 2015? \*** | | | Yes/No |
| **If Yes, name of intern(s)** | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **How did you hear about the 2016 Jersey Undergraduate Internship?** **(Highlight)** | | | | |
| Letter | Website | Friend | JEP | Email |
| Other (give details) |  | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Declaration**  I certify that the information provided on this registration form is true to the best of my knowledge and belief.  As registration forms will only be accepted electronically, please mark the box with an **‘X’** to the declaration statement above and date. Date: | | | |
| **Name:** |  | **Position:** |  |

**To register your intern with Social Security visit:** [www.gov.je/contributions](https://admin.gov.je/contributions)



**Careers Jersey is part of the Education Department**