

**Employer Work Experience Contact Information**

**Employer Worksite Information**

**Employer/Business Name:**

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**Address:**

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**Sub-Worksite:**

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**Phone:**

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**Contact Name**

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**Email Address**

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**Worksite Supervisor Name**

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**Job Title**

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**Alternate Worksite Supervisor**

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**Job Title**

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**If any individuals under the age of 18 are placed at this site, the worksite supervisors must obtain the following documents:**

- **PA Child Abuse Clearance**
- **PA State Police Background Check**
- **FBI Fingerprint Check**

**Copies of clearances must be sent electronically to vendor staff.**