

September 22, 2010
**BUCKEYE
JOB FAIR**
ALL CAMPUS | ON CAMPUS
Great Hall Meeting Rooms
The Ohio Union

Please complete the registration form and return to Jen Cottrell. Please note that the information fields in **RED** will be displayed in the program provided to students.

Registration Form

Name of College, Dept. or Unit: _____

Registration Contact Person: _____

Campus Address: _____

Phone Number: _____

Email Address: _____

Do you need electricity? _____

of people attending from your office? _____

Human Resources Contact: _____ **Phone:** _____ **Email:** _____

What Type of positions do you offer? (Circle One) Work study Non-Work Study Both

What type of wages do you offer? _____

Do you require an interview? _____

Estimated # of employees to hire: _____

Please provide a brief description about your department and positions being offered for the job fair program. _____

*Completed forms and 100W's may be email or faxed to Jen Cottrell's attention at
Cottrell.76@osu.edu or **292-1816**

*If paying by check, please make checks payable to: The Ohio State University

*Please return registration forms by: **Friday, August 13th 2010**