Ride and Decide Employer Enrollment Form



	Company Name:	Date:
Company	Address	
	Address:	
	City: Zip:	Phone:
]	
Contact	Name:	Title:
ŭ	Email:	Cell:
Count	y: Nearest High School:	
Treat out ingit conton.		
Describe your business:		
Describe the type of work the student(s) will perform:		
Number of Student positions: June 2020 (4 weeks) July 2020 (4 weeks) Hours per week:		
Schedule (days of week and start/end times): Pay rate: \$ per hour		
Sched	lule (days of week and start/end times):	Pay rate: \$ per hour
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Please R	u have any special requirements or requests (uniform, special she initial each: o you agree to abide fully and completely to the Tennessee Depa egulation Act including but not limited to: restricted duties, hours o you agree to pay the student at least minimum wage?	artment of Labor Child Labor Law and worked and records on file?
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Please Do you Do you Do you Does y	u have any special requirements or requests (uniform, special shape initial each: o you agree to abide fully and completely to the Tennessee Depa egulation Act including but not limited to: restricted duties, hours o you agree to pay the student at least minimum wage? oes your company have Tennessee mandated Workman's Compo you agree to work within the parameters set by the School Dist uperform background checks on your employees?	artment of Labor Child Labor Law and sworked and records on file? pensation insurance? trict CTE Program assigned? yes □ no
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Please Plo you Plo you Do you Do you Does y Will you	u have any special requirements or requests (uniform, special she initial each: o you agree to abide fully and completely to the Tennessee Depa egulation Act including but not limited to: restricted duties, hours o you agree to pay the student at least minimum wage? oes your company have Tennessee mandated Workman's Compo you agree to work within the parameters set by the School Distru perform background checks on your employees? your company have a Drugfree Workplace certification?	artment of Labor Child Labor Law and sworked and records on file? pensation insurance? trict CTE Program assigned? yes □ no □ yes □ no Pass a physical? □ yes □ no Phone: