

**FIRST SOURCE HIRING ORDINANCE (FSHO)****FORM: FSHO-3A****New Job Opportunity****CITY OF LOS ANGELES**

Please submit this form to the attention of Breeana London, **VIA FAX** at (213) 744-7223, or **SCAN/EMAIL** at [breeana.london@lacity.org](mailto:breeana.london@lacity.org) to the Economic & Workforce Development Department. Breeana London may be contacted at (213) 744-7213. Please complete one FSHO-3 Form per Job Classification.

**SECTION I. CONTRACTOR INFORMATION**

Name of Contractor: \_\_\_\_\_ Contractor Phone#: \_\_\_\_\_  
 Designated Contractor Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Business Tax Registration Code (BTRC)#: \_\_\_\_\_

**SECTION II. CONTRACT INFORMATION**

City Awarding Department: \_\_\_\_\_ City Contract#: \_\_\_\_\_  
 Project Title (as listed in your contract): \_\_\_\_\_  
 Name of Prime Contractor (if you are a subcontractor): \_\_\_\_\_

**SECTION III. JOB OPPORTUNITY INFORMATION**

- I am completing this form as a: \_\_\_\_\_ Proceed to Question 2.  
 Prime Contractor  Subcontractor (1<sup>st</sup> Tier)  \_\_\_\_\_ Tier Subcontractor
- Do you plan to fill the new job opportunity by transfer or promotion of existing staff?  
 YES – Proceed to Section V, fill out FSHO-3B – Transfer/Promotion Form, and submit.  NO – Proceed to Question 3.
- What is the name of the Job Classification for this new job opportunity? \_\_\_\_\_ Proceed to Question 4.
- How many vacancies do you have for this Job Classification? \_\_\_\_\_ Proceed to Question 5.
- Is this job opportunity for a managerial, supervisory, or confidential position, or requires a professional license?  
 YES – This classification is not covered by the FSHO. No documentation needs to be submitted to EWDD. Pursuant to Regulation #4 of the FSHO, you must maintain in your files documentation verifying that this position is not covered by the FSHO. Although you are not required to fill your new job opportunity through the FSHO program, it is encouraged. If you would like to fill your job opportunity through the FSHO, proceed to Question 6.  
 NO – Proceed to Question 6.
- What is the projected date to send this job opportunity out to the public? \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Proceed to Section IV.

**SECTION IV. JOB DESCRIPTION AND QUALIFICATIONS INFORMATION**

Please give a description and qualifications for your new job opportunity. Attach additional sheets for more detail.

**SECTION V. SIGNATURE AND SUBMIT**

I declare under penalty of perjury under the laws of the State of California that I am authorized to bind the entity listed on this form and that the information provided on this form is true and correct to the best of my knowledge.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, \_\_\_\_\_ (City) \_\_\_\_\_ (State)

Signature \_\_\_\_\_

Name (Please Print) \_\_\_\_\_

Title \_\_\_\_\_

Federal Tax/Employer Identification Number \_\_\_\_\_

**SECTION VI. FILLED OUT BY ECONOMIC & WORKFORCE DEVELOPMENT DEPARTMENT ONLY**

Received Date	Received by	Contact Email/Phone	Routed to Referral Resource(s)	New FSHO ID# Assigned
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**SECTION VII. FILLED OUT BY REFERRAL RESOURCE CENTER ONLY**

Received Date	Referral Resource Name	Assigned to	Contact Phone#	Contact Email
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