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

New Job Opportunity

Please submit this form to the Economic & Workforce Development Department via SCAN/EMAIL to EWDD.FSHO-Jobs@lacity.org

Please complete one FSHO-3A 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): ______________________________________________________________________

SECTION III. JOB OPPORTUNITY INFORMATION

1. I am completing this form as a: Proceed to Question 2.
   □ Prime Contractor □ Subcontractor (1st Tier) □ _____ Tier Subcontractor

2. 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.

3. What is the name of the Job Classification for this new job opportunity? Proceed to Question 4.

4. How many vacancies do you have for this Job Classification? ____________________________ Proceed to Question 5.

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.

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 ____________________________, ____________________________

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 _______

SECTION VII. FILLED OUT BY REFERRAL RESOURCE CENTER ONLY

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

Rev. 01/2020
Office of Contract Compliance, EEOE/CCA (213) 847-2625