

# *Best Foot Forward*

## Job Sampling Initiative for Students with Special Needs

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### EMPLOYER QUESTIONNAIRE

To try to ensure the best match possible between your business and a student with special needs, please provide us with information about your business and its needs. E-mail the completed questionnaire to Alan Levine, Best Foot Forward Outreach Coordinator, at [alevine@falconsinger.com](mailto:alevine@falconsinger.com).

Name of Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: : \_\_\_\_\_

Contact person/title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Describe your line of business: \_\_\_\_\_

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Provide information about the physical features of your business: \_\_\_\_\_

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How many students are you interested in having work as interns? \_\_\_\_\_

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Describe the job that you would like to have performed (if you have more than one job, list each separately): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LOGISTICAL REQUIREMENTS:**

Number of days per week preferred \_\_\_\_\_  
Any preference as to which days \_\_\_\_\_  
Number of hours per day preferred \_\_\_\_\_  
Any preference for time of day \_\_\_\_\_

Include any other information about your business or the opportunity that you think would be helpful:  
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Please note that all placements are unpaid internships. Upon request, the school will need to provide the business with an insurance rider.