



**GOVERNMENT OF THE DISTRICT OF COLUMBIA
FIRST SOURCE PROGRAM
INITIAL EMPLOYMENT PLAN**



GOVERNMENT-ASSISTED PROJECT/CONTRACT INFORMATION

CONTRACT/SOLICITATION NUMBER: _____
 DISTRICT CONTRACTING AGENCY: _____
 CONTRACTING OFFICER: _____
 TELEPHONE NUMBER: _____
 TOTAL CONTRACT AMOUNT (est.): _____
 EMPLOYER CONTRACT AMOUNT: _____
 Type of Award: Construction Non-Construction
 PROJECT/CONTRACT NAME: _____
 PROJECT ADDRESS: _____
 CITY: _____ STATE: _____ ZIP CODE: _____
 PROJECT START DATE (est.): _____ PROJECT END DATE (est.): _____
 EMPLOYER START DATE (est.): _____ EMPLOYER END DATE (est.): _____

EMPLOYER INFORMATION

EMPLOYER NAME: _____
 EMPLOYER ADDRESS: _____
 CITY: _____ STATE: _____ ZIP CODE: _____
 TELEPHONE NUMBER: _____ FEDERAL IDENTIFICATION NO.: _____
 CONTACT PERSON: _____
 TITLE: _____
 E-MAIL: _____ TELEPHONE NUMBER: _____

NEW JOB CREATION PROJECTIONS: Please indicate ALL new jobs employer will create as a result of the Project or Contract.

JOB TITLE	# OF JOBS PROJECTED	STATUS	SALARY RANGE	UNION MEMBERSHIP REQUIRED NAME LOCAL#	PROJECTED HIRE DATE
1		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
2		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
3		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
4		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
5		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
6		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
7		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
8		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
9		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			
10		<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time			

If the EMPLOYER WILL NOT be creating any new jobs, a justification is required. Please explain below. Attach additional sheets as needed.