

Post- an- Opportunity with IL Fire/EMS Recruitment

Submitter

Name: _____ Email: _____ Number: _____

Organization: _____

Organization

Legal Name: _____

Address: _____

County: _____

Website: _____ Direct web address: _____

Contact: _____ Email: _____ Number: _____

Other necessary details: _____

Details

Deadline: _____

Price: _____

(Please attach any necessary documents/flyers)

Other necessary details: _____

Who can Attend? _____

Please attach your organization's logo (as JPG) with the submission.