

**Connecticut Dietetic Association
Job Posting Form**

**Describe the job
This information will be posted on the website**

Job Title:

Name of Employer:

**Address:
(Location of Job)**

City, State, ZIP:

Check all that apply:

Responsibilities:

Qualifications:

Other Comments:

Rate of Pay (Optional):

Contact Person:

Telephone:

Fax:

Email:

Website:

**Please provide the following information so that we may contact you.
This information will not be placed on the website.**

Your Name:

Your Email:

Your Telephone:

Comments:

**Provide the Billing Information.
This information will not be placed on the website.**

Name of Contact:

Title:

Address:

City, State, ZIP

Telephone:

Email:

Fax:

Comments: