

**CONDITIONAL JOB OFFER MATRIX**

GENERIC INFORMATION	SPECIFIC INFORMATION
<b>Today's Date</b>	
<b>Applicant's Name</b>	
<b>Applicant's Address</b>	
<b>Applicant's City, State Zip Code</b>	
<b>Name of Position</b>	
<b>Start Date</b>	
<b>Manager or Supervisor of Position</b>	
<b>Location of Position</b>	
<b>Terms of Payment Commission Agreement ___Yes ___No</b>	
<b>Benefits</b>	
<b>Approximate Hours per Week</b>	
<b>Types of Background Checks to be Performed</b>	
<b>Name of Company Performing the Drug Test</b>	
<b>Name of Person Responsible for Hiring</b>	

**Manager's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_