

EMPLOYER FORM
MATHEMATICAL SCIENCES EMPLOYMENT CENTER
JANUARY 19-22, 2000
WASHINGTON, DC

1. Forms should be accessed and submitted electronically if possible. The URL for accessing Employment Center information and forms is <http://www.ams.org/emp-reg/>.
2. Paper or electronic forms are due, along with payment and your Advance Registration/Housing Form, by November 8 (to AMS, P.O. Box 6887, Providence, RI 02940) in order to be included in the *Winter List of Employers*.
3. Please list all potential interviewers, for reference by applicants, but pay fees only for each separate table.
4. Forms will not be processed until registration and payment of fees have been received.

EMPLOYER CODE:	Institution _____		
	Department _____		
	Mailing address _____ _____		
	E-mail address (one only) _____		
	URL (or other contact info) _____		
	Name(s) of Interviewer(s) 1. _____		
	2. _____		
	3. _____		
	4. _____		
	Specialties sought _____ _____		
	Title(s) of position(s) _____		
	Number of positions _____		
	Starting date _____ / _____	Term of appointment _____	
	Month Year	Years	
	Renewal	Tenure-track position	
	<input type="checkbox"/> Possible <input type="checkbox"/> Impossible	<input type="checkbox"/> Yes <input type="checkbox"/> No Teaching hours per week _____	
	Degree preferred _____	Degree accepted _____	
	Duties _____ _____ _____		
	Experience preferred _____ _____ _____		
	Significant other requirements, needs, or restrictions which will influence hiring decisions _____ _____ _____		
	This position will be subject to a security clearance which will require U.S. citizenship: <input type="checkbox"/> Yes <input type="checkbox"/> No		
	THE EMPLOYER PLANS TO USE THE FOLLOWING SERVICES (check all that apply):		
	<input type="checkbox"/> One or more computer-scheduled Interview Tables		
	<input type="checkbox"/> One or more self-scheduled Interview Tables		
	<input type="checkbox"/> Information Booth table		
	<input type="checkbox"/> Placing this form for information only (not using a table)		