

**COMPLETE AND RETURN
THIS REGISTRATION FORM BY FAX,
EMAIL OR MAIL**

Name of Organization or Business:

Name(s) of Representative(s) attending the Teen Job Fair:

1. _____

2. _____

Contact Information:

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ **Fax:** _____

E-mail: _____

What opportunities will your organization share with youth?

Paid Employment

Paid Internships

Unpaid Internships

Job Training

Volunteer Positions

Will you be conducting interviews at the Fair? Yes No

Contact: Pat Behrend

Phone: 612-673-6220

Fax: 612-673-5299

Email: pat.behrend@minneapolismn.gov

Mail: Minneapolis Employment & Training,

105 Fifth Ave. S., Suite 200, Minneapolis, MN, 55401

**Registrants will receive a confirmation letter with more
information about the Teen Job Fair.**