

Recruitment Order Form

DOC. NO. 12 (as of 28Jul15)

Please fill the form in English.

Date.....

1: Information of the Employer			
If the employer is an individual:			
Name of the Employer	Ms. / Mr.		
ID Number of the Employer			
If the employer is a legal entity:			
Name of the Legal Entity			
Corporate ID No. /Registered Partnership Registration No.			
Name of the Authorized Representative	Ms. / Mr.		
ID Number of the Authorized Representative			
Address in details			
Geographic Area		Phone No.	
Type of agriculture	Plant ()	Animal ()	
2: Information of the Recruitment Agency			
Name of the Recruitment Agency	MABAT MOSHAVIM FOREIGN WORKERS		
Company Registration number	514824739		
Name of the Authorized Representative	Ms. / Mr.	Erez Moyal	
ID No. of the Authorized Representative	040151300		
Address in details	Leonardo de vinchi 19 Tel Aviv	Phone No.	052-6220848
Email Address	erez@mbtm.org.il	Fax No.	03-6223080
3: Details of the Recruitment Order			
Number of workers requested under the below requirements	() Persons		
Sex	No preference / Request (Male / Female)		
Gross Basic Salary	() NIS		

Please indicate minimum qualifications required for the worker. If you require additional requirements, please indicate in the "Other requirements" section. The more specific the requirements get, the longer the recruitment process may take. Some special requirements may not be accommodated.

Please specify the amount of salary that you are willing to pay to the workers in the "Gross Basic Salary" section. The payment should not go below the minimum wage set by the Israeli law.

We hereby submit the Recruitment Order, with full understanding of the terms of employment stipulated in the standard employment contract.

Employer

Recruitment Agency

(.....)

(.....)

Date signed/...../.....

Date signed/...../.....