APPLICATION FOR EMPLOYMENT

Livingston Parish Council (LPC) is an equal opportunity employer. We are committed to our policy of providing equal employment opportunity to employees and job applicants in a manner consistent with applicable laws and regulations, including federal laws prohibiting employment discrimination on the basis of race, color, creed, national origin, sex, age, disability, genetic information, or any other protected characteristic.

INTRODUCTORY INFORMATION:

Name: _____ Date: _____
Address: _____ DL #: _____ Exp: _____ Class: ____
City: _____ State: _____ Zip: _____ Phone: _____

APPLICANT QUESTIONS:

Position desired: _____

Type of worked desired: F/T P/T Temp Salary desired: _____ Date Available: _____

If hired, can you provide documents required to establish your eligibility to work in the U.S.? __ Yes __ No

Are you 16 years of age or older? __ Yes __ No Have you previously been employed by LPC? __ Yes __ No

How were you referred to LPC? _____ Have you ever been convicted of a felony? __ Yes __ No

EDUCATION:

High School or last grade completed:

Name & Address of School: _____

Course of Study: _____ Number of years completed: ___ Degree/Diploma: _____

College or Technical School

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____

Degree/Diploma: _____

Other Schooling or Training

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____

Degree/Diploma: _____

Additional Qualifications/Certifications:
_____

MILITARY EXPERIENCE:

Branch of Service: _____

Rank/Type of Service: _____

Job-Related Training/Experience: _____

RECORD OF EMPLOYMENT:

Place an X by the employer(s) you ***do not*** want us to contact. List positions starting with most recent:

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

WORK-RELATED REFERENCES: (Do not include relatives)

	Name	Occupation	Contact Information
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

STATEMENT (Please read this statement carefully before signing this application):

I understand that employment with Livingston Parish Council is at-will, meaning that I or Livingston Parish Council may terminate my employment at any time, or for any reason consistent with applicable state or federal law.

I authorize Livingston Parish Council to conduct a thorough background investigation of my work and personal history, and verify all data given on this application and during interviews. I hereby release the Organization, and its representatives or agents, from any liability that might result from such an investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.

I understand that Livingston Parish Council requires the successful completion of a drug and/or alcohol test as a condition of employment.

I understand this application will be active for a period of 90 days; after that time, if I wish to be considered for employment, I must submit a new application. I certify that all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

Signature of Applicant: _____ Date Signed: _____