

JACKSON PARISH POLICE JURY

500 East Court Street; Room 301

Jonesboro, LA 71251

(318) 259-2361

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran

(PLEASE PRINT)

Position Applied For:			Date of Application:		
Last Name		First Name		Middle Name	
Mailing Address		City	State	Zip	
Physical (911) Address		City	State	Zip	
Telephone Number(s): Home: Work:			Referred By:		

- ☐ Yes ☐ No Are you currently employed?
- ☐ Yes ☐ No May we contact your present employer?
- ☐ Yes ☐ No Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
(Proof of citizenship or immigration status will be required upon employment)
- ☐ Yes ☐ No Do you possess a valid driver's license?
- ☐ Yes ☐ No Do you possess a valid CDL?
If yes, what class? _____
- ☐ Yes ☐ No Do you have transportation to get to and from work?
- ☐ Yes ☐ No Are you currently on layoff status and subject to recall?
- ☐ Yes ☐ No Are you related to any Police Jury members?
- ☐ Yes ☐ No Are you related to anyone currently employed by Police Jury?
- ☐ Yes ☐ No Have you ever pled "guilty" or "no contest" to, or been convicted of a felony/sexual misconduct within the past 7 years?
If yes, please explain _____

Are you available to work: ☐ Full Time ☐ Part time ☐ Shift Work ☐ Temporary

On what date would you be available for work? _____

ANSWERING "YES" TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Elementary School	High School	Trade School	College/University
School Name and Location				
Years Completed	4 5 6 7 8	9 10 11 12	Completed Y N	1 2 3 4
Describe Course of Study				
Describe any specialized training, apprenticeship or skills				
State any additional information you feel may be helpful to us in considering your application.				

Work Experience

Start with your present or most recent employer. Include any job-related military service assignments and voluntary activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer:		Employment Dates		Work Performed
Address:		Start	End	
Telephone Numbers(s)		Hourly Rate/Salary		
Job Title:	Supervisor:	Starting	Final	
Reason for Leaving:				
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Employer:		Employment Dates		Work Performed
Address:		Start	End	
Telephone Numbers(s)		Hourly Rate/Salary		
Job Title:	Supervisor:	Starting	Final	
Reason for Leaving:				
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Work Experience (Continued)

Employer:		Employment Dates		Work Performed
Address:		Start	End	
Telephone Numbers(s)		Hourly Rate/Salary		
Job Title:	Supervisor:	Starting	Final	
Reason for Leaving:				
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Employer:		Employment Dates		Work Performed
Address:		Start	End	
Telephone Numbers(s)		Hourly Rate/Salary		
Job Title:	Supervisor:	Starting	Final	
Reason for Leaving:				
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application and / or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of Jackson Parish Police Jury.

Signature of Applicant

Date

I, _____ AUTHORIZE THE JACKSON PARISH
POLICE JURY TO DO A CRIMINAL HISTORY SEARCH AT ANY
NECESSARY LOCATION FOR EMPLOYMENT PURPOSES ONLY.

(Print Name)

Signature

Date of Birth

Social Security Number

CHECKED BY:

DATE

Findings _____

MVR / CRIMINAL AUTHORIZATION / DISCLOSURE

PLEASE READ CAREFULLY BEFORE SIGNING

I authorize the Jackson Parish Police Jury to obtain motor vehicle record reports and criminal record information for employment purposes. Such employment purposes are limited to my status as a driver for the business related purposes of the Jackson Parish Police Jury.

I understand that upon written request to the Jackson Parish Police Jury, I will be provided with a copy of all motor vehicle record reports and criminal record information through said report.

By signing below, I authorize all government agencies, states departments of motor vehicles, law enforcements agencies, workers' compensation agencies, state and federal courts, and former employers to release requested information they may have about me and release them from any liability from doing so.

A copy of this authorization is as valid as the original.

Signature

Driver's License No.

State

Name (please print)

Date