

Have you ever been convicted of any traffic violations, including speeding violations? ____ Yes ____ No

Give Details: _____

Have you ever been convicted of a crime other than violation of motor vehicle laws or ordinances?
____ Yes ____ No

Give Details: _____

MILITARY SERVICE RECORD: Present Selective Service Classification: _____

Did you serve in the U. S. Armed Forces: ____ Yes ____ No If yes, Branch: _____

Dates of Duty: From: _____ to _____ Rank: _____

Rank at Discharge: _____

List duties performed, including specialized training: _____

EDUCATION RECORD:	Name & Location	Date		Graduated?		Degree Rec'd or Course Studied:
		From	To	Yes	No	
Elementary:	_____	_____	-	_____	_____	_____
High School:	_____	_____	-	_____	_____	_____
Technical College:	_____	_____	-	_____	_____	_____
College:	_____	_____	-	_____	_____	_____
Other:	_____	_____	-	_____	_____	_____

Do you speak any foreign language fluently? ____ Yes ____ No If yes, specify: _____

Computer skills: (Please circle) Access Excel Lotus Power Point Word Word Perfect

Other: _____

Office machines you can operate skillfully: _____

Shop machines you can operate skillfully: _____

Have you ever been discharged from a job? ____ Yes ____ No If yes, explain in detail: _____

EMPLOYMENT RECORD: (beginning with most recent)	Name & Address of Company	Date From	Date To	Position Held	Name of Supervisor
Present:	_____	_____	_____	_____	_____
	_____	Description of Duties: _____			
	_____	_____			
	Phone: _____	_____			
	May we contact them if we are considering hiring you? ____Yes ____No				
1:	_____	_____	_____	_____	_____
	_____	Description of Duties: _____			
	_____	_____			
	Phone: _____	_____			
2:	_____	_____	_____	_____	_____
	_____	Description of Duties: _____			
	_____	_____			
	Phone: _____	_____			
3:	_____	_____	_____	_____	_____
	_____	Description of Duties: _____			
	_____	_____			
	Phone: _____	_____			
Have you ever worked for St. Mary Parish Government? ____ Yes ____ No If yes, specify details:					
From _____ to _____ Department: _____ Supervisor: _____					
Reason for Leaving: _____					

List Professional License Registrations and/or Certifications (Including state issued and certification numbers): _____

PERSONAL REFERENCES (NO RELATIVES)

Name & Occupation	Address	Phone:
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

ANNEX D. APPLICANT CONSENT AND RELEASE FORM.

In consideration of me being considered for employment by St. Mary Parish Government, I give my consent to, and authorize Bourgeois Medical Clinic or Jesus L. Chua, MD to perform testing or medical procedures necessary to determine the presence and/or level of alcohol and drugs in my body. I further give my consent to release to St. Mary Parish Government or its designated agents, the results of any medical tests performed by the above named providers, including any tests or medical procedures to determine the level and/or presence of alcohol or drugs in my body. I realize that my refusal to sign this form constitutes a violation of the stated policy of St. Mary Parish Government, and, for that refusal I will not be considered for, and knowingly waive any possibility for employment with the Parish. I understand that this consent and release shall be valid for the length of my employment with St. Mary Parish Government.

AFFIDAVIT

I certify that the answers given by me in the foregoing questions are true and correct without consequential omissions of any kind whatsoever. I agree that the Parish shall not be liable in any respect if my employment is terminated because of false statement, answers or omissions made by me in this questionnaire. I authorize the companies, schools, or persons named above to give any information regarding my employment, together with any other information they have regarding me whether or not it is in their records. I hereby release said companies, schools, or persons from all liability for any damage for issuing this information. I also understand that any offer of employment will be conditioned on results of a pre-employment drug screen, background check, and driver's license check.

Background & Driving Record Check

I am applying for a position with St. Mary Parish Government; therefore, hereby authorize the St. Mary Parish Sheriff's Office or another organization designated by St. Mary Parish Government to perform a background check, which includes a driving record check, as part of my application of employment with St. Mary Parish Government. I authorize the St. Mary Parish Sheriff's Office or another organization designated by St. Mary Parish Government to release the information regarding the background check and driving record check to St. Mary Parish Government. I understand that this information is used for this purpose only and will not be used in discrimination purposes.

POST OFFER

Post offer criteria are stated at the top of this page known as Annex "D".

In consideration of my employment I agree to conform to the rules and regulations of the Parish, and that my employment and compensation may be terminated, with or without cause, and without notice at any time, at the option of either the Parish or myself. I understand that no representative of the Parish has the authority to enter an agreement with me for employment for any specified period of time, or to make any agreement with me to the foregoing.

APPLICANT SIGNATURE

Applicant Signature: _____

Print Name of Applicant: _____

Date Completed: _____

NOTE: THIS APPLICATION WILL NOT BE CONSIDERED VALUD WITHOUT THE APPLICANT'S SIGNATURE SECTION COMPLETELY FILLED OUT AND ALL 4 PAGES ARE RECEIVED. (Revised 12/10/2012)