



Parish of Ascension

Application of Employment

REGISTRAR OF VOTERS

Instructions: It is the policy of Parish of Ascension to provide equal opportunity with regard to all terms and conditions of employment. The Parish of Ascension complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, disability, veteran status, age, or any other protected characteristic.

Applications/resumes submitted for employment with Parish of Ascension are considered public information under The Louisiana Public Records Act, LA R.S. 44-1-41.

Name: _____

Phone: _____

Address: _____

City/State/Zip: _____

E-mail Address: _____

Position applied for: _____

Expected pay: _____

Would you accept full-time work? Yes No

Would you accept part-time work? Yes No

On what date would you be available for work? _____

I understand that if this position requires a valid driver's license, proof will be required upon hire. Yes No

Have you ever been employed here before? Yes No Dates _____

Do you have a CDL License? Yes No If yes, please list the Class _____

Special training or skills:

Please check all that apply to you.

- Slope Mower
- Bush Hog
- Sheep Foot Roller
- Wobble Wheel Roller
- Fork Lift
- Front End Loader
- Bobtail Dump Truck
- Winch Truck
- Motor Patrol
- Back Hoe
- Boom Mower
- Mosquito Spray Rig
- Spray Rig

- Tandem Dump Truck
- Fuel Truck
- Low Boy Truck and Trailer
- Track Hoe
- Gradall
- Vaccum Truck
- Drag Line
- Type: WPM: _____
- Microsoft Word
- Microsoft Excel
- Microsoft Access
- Microsoft Powerpoint
- Microsoft Outlook

Other: _____

Previous Employers and Addresses

Place an X by the employer(s) you do not want us to contact. List the most recent employer first.

1. Company Name: _____ Phone: _____

Contact Name: _____

Address: _____

Position: _____ Phone: _____

Employed: From _____ To _____ Last Wage: _____

Reason for leaving: _____

2. Company Name: _____ Phone: _____

Contact Name: _____

Address: _____

Position: _____ Phone: _____

Employed: From _____ To _____ Last Wage: _____

Reason for leaving: _____

3. Company Name: _____ Phone: _____

Contact Name: _____

Address: _____

Position: _____ Phone: _____

Employed: From _____ To _____ Last Wage: _____

Reason for leaving: _____

4. Company Name: _____ Phone: _____

Contact Name: _____

Address: _____

Position: _____ Phone: _____

Employed: From _____ To _____ Last Wage: _____

Reason for leaving: _____

Educational Background

High School:

Name and location: _____

Course of study: _____ Did you graduate? Yes No Degree or Diploma: _____

College:

Name and location: _____

Course of study: _____ Did you graduate? Yes No Degree or Diploma: _____

Graduate School:

Name and location: _____

Course of study: _____ Did you graduate? Yes No Degree or Diploma: _____

Vocational, or other, training:

Name and location: _____

Course of study: _____ Did you graduate? Yes No Degree or Diploma: _____

Continuing Education: _____

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED, AND IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT HAS ANY AUTHORITY TO ENTER INTO AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

Applicant's Signature _____ Date _____