

APPLICATION FOR EMPLOYMENT



LAKE CHARLES WARD 3 RECREATION

3210 Power Center Parkway
Lake Charles, Louisiana 70607
www.lcward3recreation.com

NAME: _____

POSITION: _____

DATE: _____

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, ancestry, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
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How Did You Learn About Us?

LC Ward 3 Website
 Advertisement
 Friend
 Job Fair
 Relative
 Inquiry
 Other _____

Last Name	First Name	Middle Name	
Address	City	State	Zip Code
Telephone Number(s)	Email Address		

Best time to contact you at home is: :..... ^{AM}/_{PM}

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

 If Yes, give date _____

Have you ever been employed with us before? Yes No

 If Yes, give date _____

Do any of your relatives work here? 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

Date available for work ___/___/___ What is your desired salary range? _____

Are you available to work: Full-Time
 Part-Time
 Temporary (please indicate dates available ___/___/___ - ___/___/___)

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last five years? Yes No

A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, creed, gender, national origin, ancestry, age, disability, marital or veteran status, or any other legally protected status.

1.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
2.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
3.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
4.	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal race, color, religion, creed, gender, national origin, ancestry, age, disability, marital or veteran status, or any other legally protected status.

ADDITIONAL INFORMATION

SPECIALIZED SKILLS (LIST SKILLS/EQUIPMENT OPERATED)

Computer Skills:	Machinery (list):	Other (list):
Typing WPM _____	_____	_____
Software programs (list): _____	_____	_____
_____	_____	_____
_____	_____	_____

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

As a condition of my employment, I agree to submit to a criminal background check, driving record check, drug screen, and/or physical and to have the results reviewed by Human Resources. I understand that my employment with the Calcasieu Parish Police Jury is contingent upon satisfactory results of these screenings.

Signature of Applicant Date

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

___ YES ___ NO

REFERENCES

1.	()	
	Name	Phone #
	Address	
2.	()	
	Name	Phone #
	Address	
3.	()	
	Name	Phone #
	Address	