

EDUCATION AND TRAINING

ARE YOU A HIGH SCHOOL GRADUATE? _____ yes _____ No

CIRCLE THE HIGHEST GRADE COMPLETED: 1 2 3 4 5 6 7 8 9 10 11 12

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LEVEL	Name of School/Location	Yrs attended Mo/Yr to Mo/Yr	Did you Graduate?	Major Subj.	Minor Subj.
High School	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
University	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____

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List the names and numbers of occupational licenses or certifications possessed: _____

EMPLOYMENT RECORD

Account for all employment, including military service. Start with your current or last job and work back through your history. (Resume is welcome BUT CAN NOT substitute for completion of this section.)

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1. Employer _____ Job Title(s) & Duties _____
 Address _____
 Phone _____
 From: _____ to _____ Reason for leaving: Ordinary Resignation, Forced Resignation, Dismissal (Fired), Layoff (Circle One)
2. Employer _____ Job Title(s) & Duties _____
 Address _____
 Phone _____
 From: _____ to _____ Reason for leaving: Ordinary Resignation, Forced Resignation, Dismissal (Fired), Layoff (Circle One)
3. Employer _____ Job Title(s) & Duties _____
 Address _____
 Phone _____
 From: _____ to _____ Reason for leaving: Ordinary Resignation, Forced Resignation, Dismissal(Fired), Layoff (Circle One)
4. Employer _____ Job Title(s) & Duties _____
 Address _____
 Phone _____
 From: _____ to _____ Reason for leaving: Ordinary Resignation, Forced Resignation, Dismissal(Fired), Layoff (Circle One)

REFERENCES

List three persons not related to you who have knowledge of your qualifications and skills for the position for which you are applying.

Full Name	Mailing Address	Occupation

UNEMPLOYMENT DATA

List and explain all periods of Unemployment During the last 10 years.

IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS, EXPLAIN IN "REMARKS".

- Have you ever been convicted of or plead guilty to any law violation other than minor traffic violation? Include DRUG and DWI convictions. yes no
 - Were you ever fired or asked to resign from any Job. yes no
 - Do you currently hold or are you a candidate for any elective Office? Explain: yes no
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PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION.

DISCLAIMER AND SIGNATURE

Under penalties of perjury, I declare that my answers to the questions on the application and any necessary examination and supplements are true and give the City of Opelousas the right to investigate all information given and to secure additional appropriate information if necessary. I understand that any inquiry may include information as to my personal characteristics, employment verification, reference checks, criminal records, motor vehicle records, and appropriateness for employment. In accordance with the law and my understanding of this statement, I authorize my current and former employers to give any information regarding my employment, together with all information regarding me, and hereby release from all liability or responsibility all persons, companies, or corporations furnishing such information in good faith. I also authorize the release of my scholastic ratings to the City of Opelousas by schools and other educational institutions that I have attended.

I understand that the completion of this application does not assure me a position with the City of Opelousas and does not obligate the City of Opelousas to hire me in any way. I **FURTHER UNDERSTAND THAT ANY MISREPRESENTATION HEREIN MAY CAUSE MY APPLICATION TO BE REJECTED, NAME TO BE REMOVED FROM THE ELIGIBLE REGISTER AND/OR SUBJECT ME TO DISMISSAL.** I understand that candidates selected for hire must pass a physical and drug screen prior to employment. I am aware that the results will be made available to the Civil Service Director or a duly authorized representative. The City of Opelousas is committed to a drug free workplace.

I understand that this application, exam documents and attachments become a part of the City of Opelousas records.

By my signature, I certify, authorize and acknowledge the above statements.

SIGNATURE _____ DATE: _____
(Unsigned applications will not be considered)

An Equal Opportunity Employer

APPLICATION FOR VETERAN'S PREFERENCE

I hereby apply for Veteran's Preference as a: (check one)

Veteran (proof 1, below)

Disabled Veteran (proof 1 & 2, below)

One or more of the following must be submitted in support of claim for Veteran's Preference:

1. True copy of honorable discharge or discharge under honorable conditions (DD-214), establishing action service between September 16, 1940 and July 25, 1947; or June 27, 1950 and January 31, 1955; or, July 1, 1958 and May 7, 1975, the Vietnam Era; however the period of July 1, 1958 and August 4, 1964 is considered a wartime period only for those who served within the area known as the Vietnam Theater; or service for which campaign badges have been authorized.

2. Certificate of existing disability (dated within the past year) for service connected disability.

Signed: _____ Date: _____

DO NOT WRITE BELOW THIS LINE. FOR OFFICE USE ONLY.

(FOR PERSONNEL DEPARTMENT USE ONLY)

Application accepted for: Promotional Entrance

Date Scheduled: _____

Application rejected Reason: _____

WRITTEN TEST	RAW SCORE	% EQUIV.	EXP/TRAINING SCORE	TOTAL
PERFORMANCE				
EXP/TRAINING				
ORAL INTERVIEW				
VETERANCE PREF				
			TOTAL:	
			RANK:	

Scored by: _____ Date: _____

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