

**JOB APPLICATION**  
**Grant Parish Police Jury**  
**1141 Landfill Road, Dry Prong, Louisiana 71423**  
**318-899-5755**

Grant Parish Police Jury is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

*Please fill out all of the sections below:*

**Applicant Information**

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Cell Number: \_\_\_\_\_ Home Number: \_\_\_\_\_

Today's Date \_\_\_\_\_

**Employment Position** Driver / Operator (full time) / (part time)

How did you hear about this position? \_\_\_\_\_

Are you available to work weekends? Yes    No

Are you available to work overtime? Yes    No

Do you have reliable transportation to and from work? Yes    No

When are you available to begin work if hired? \_\_\_\_\_

What is your desired salary? \_\_\_\_\_

**Personal Information**

Have you ever applied to or worked for Grant Parish Police Jury before? Yes    No

If so, when? \_\_\_\_\_

Do you have any friends, relatives, or acquaintances currently working for Grant Parish Police Jury? Yes    No

If yes, state name and relationship: \_\_\_\_\_

Are you 18 years of age or older? Yes    No

Are you a U.S. citizen or approved to work in the United States? Yes    No

Will you consent to a mandatory controlled substance test? Yes    No

Do you have any condition which would require special accommodations? Yes    No

If yes, please describe accommodations: \_\_\_\_\_

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes    No

If yes, please state the nature of the crime(s), when and where convicted and disposition of the case: \_\_\_\_\_

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered)

**Job Skills / Qualifications**

Do you have a CDL license? Yes    No  
If yes, is it class A or class B? Class A    Class B  
If no, are you willing to be trained to obtain a CDL license? Yes    No  
Do you have experience operating any of the following? (circle)

Tractors	Brooms	Dozer	Backhoe	Hole Patcher	Garbage Truck
Mowers	Rollers	Lowboy	Trackhoe	Chip Spreader	Limb Tractor
Forklifts	Road Grader	Bush hog	Litter Getter	Hydraulic Excavator	

Please list below the skills and qualifications you possess for the position that were not listed above:  
\_\_\_\_\_  
\_\_\_\_\_

(Note: Grant Parish Police Jury complies with the ADA and considers reasonable accommodations measures that may be necessary for eligible applicants/employees to perform essential functions.)

**Previous Employment**

Employer Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Employer Telephone: \_\_\_\_\_  
Dates Employed: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

**References**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I hereby certify that all information provided on this application is true and accurate to the best of my knowledge. I understand that any falsification or omission of information may result in the withdrawal of a job offer or termination of employment if discovered.

By signing below, I acknowledge that I have read and understand the above statement and certify that all information provided on this application is accurate

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date: