

ST. BERNARD PARISH GOVERNMENT APPLICATION FOR BOARDS AND COMMISSIONS

We consider applications for all positions without regard to race, color religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

(Please Note: All information must be supplied in order for application to be considered by Appointments Review Board, please print or type)

Date: _____ SS #: _____

Name: _____
LAST
FIRST
MIDDLE

Address: _____
NUMBER
STREET
CITY
STATE
ZIP

Phone: _____ Referred by: _____

Name and Relationship of any relatives on Boards/Commission or in our employ:

Appointment Requested

Board or Commission Requested: _____
(If applying for more than one position, please duplicate this application)

Date you will be available: _____ Are you currently serving on any board/commission: _____

Are you currently employed by St. Bernard Parish Government: _____

What Position: _____ Are you an elected or appointed official: _____

Are you registered voter in St. Bernard Parish: _____

Have you been convicted of a felony within the last seven (7) years: _____
Yes
No

Education

	School	# of Years	Graduated	Subjects studied
High School				
College				
Trade / Business				

Employment

(List below last two employers, starting with last one first)

Date		Name/Address (of Employer)	Position	Still Employed
From	To			
From	To			

References

Give the names of three persons not related to you whom you know for at least one year:

Name	Telephone Number	Business	Years Acquainted
1.			
2.			
3.			

I would like to serve on this board because:

I Certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for appointment as may be necessary in arriving at an appointment decision. This application for appointment shall be considered active for a period of time not to exceed one (1) year. Any applicant wishing to be considered for appointment beyond this time period should inquire as to whether or not applications are being accepted at that time.

Signature of Applicant	Date
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ST. BERNARD PARISH GOVERNMENT IS AN EQUAL OPPORTUNITY EMPLOYER