

Name \_\_\_\_\_

Date \_\_\_\_\_

Home Address \_\_\_\_\_

Telephone \_\_\_\_\_

Position Desired \_\_\_\_\_

## EMPLOYMENT APPLICATION



### GREATER NEW ORLEANS EXPRESSWAY COMMISSION

P.O. BOX 7656 • METAIRIE, LOUISIANA 70010

TELEPHONE 504-835-3118

[www.thecauseway.us](http://www.thecauseway.us)

**(WORK EXPERIENCE (BEGIN WITH PRESENT OR LAST JOB))***(Please Print & Fill Out Carefully & Completely)*

FROM Mo./Yr.	TO Mo./Yr.	NAME & ADDRESS OF COMPANY	TYPE OF BUSINESS	LAST POSITION HELD
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Monthly Salary	Start \$	Present or Final \$	Reason for terminating or considering change	
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Name & Title of your  
Immediate Supervisor

Nature of Work Performed and Position Responsibilities

May we contact you at your business location? ☐ Yes ☐ No Telephone Number

FROM Mo. /Yr.	TO Mo. /Yr.	NAME & ADDRESS OF COMPANY	TYPE OF BUSINESS	LAST POSITION HELD
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Immediate Supervisor

Nature of Work Performed and Position Responsibilities

## EDUCATION

NAME & ADDRESS OF SCHOOL	NUMBER. OF YEARS ATTENDED	SUBJECTS / MAJOR	DIPLOMA / DEGREE

## PERSONAL DATA

Are you under 18 years of age? ☐ Yes ☐ No

Location Desired ☐ North Shore ☐ South Shore

### Salary Requirements

If hired, date available to start	Dates available for interviews	Notice required for interviews
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Have you ever been convicted of a felony? ☐ Yes ☐ No

If yes, explain in detail

What are your hobbies?

Professional or Fraternal Organizations\*\*

Social or Civic Organizations\*\*

Do you have any outside business  
interests? If so, explain

### MILITARY SERVICE (Exclude service for any country other than the U.S.)

Have you had U.S. Military Service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Branch of Service
Rank upon Entering	Rank at Discharge	Disposition at Discharge <input type="checkbox"/> Honorable <input type="checkbox"/> Dishonorable

Do you have any military training requirements that  
would affect your ability to accept any work offered? ☐ Yes ☐ No If yes, please explain

Principal Active Duty Assignments

Qualifications for Job Expected

\*\* Exclude any responses that would indicate race, religion, color, national origin or ancestry.

Do you have any \*relatives currently employed by the Greater New Orleans Expressway Commission ☐ Yes ☐ No  
If yes, please provide name and relationship for each

\*The Greater New Orleans Expressway Commission defines a relative as any person who is related by blood or marriage, or whose relationship with the employee is similar to that of persons who are related by blood or marriage.

I understand that if I fail to disclose the name and relationship of any person currently employed by the Greater New Orleans Expressway Commission (including employees, commissioners, consultants, etc.) that I am related to by blood or marriage or whose relationship to me is similar to that of persons who are related by blood or marriage, this shall be considered sufficient grounds for immediate discharge.

REFERENCES (Provide names/addresses/phone numbers of three persons, not related to you, whom you have known at least three years.)

Name	Address	City/State	Phone No.	Occupation
Name	Address	City/State	Phone No.	Occupation
Name	Address	City/State	Phone No.	Occupation

**PRE-EMPLOYMENT STATEMENT**

I understand that my filling out this application for employment does not obligate the Greater New Orleans Expressway Commission to offer me employment.

I certify that the facts set forth in my application for employment are true, correct and complete. I further understand and agree that any misrepresentation or false statement on this application shall be considered sufficient cause for immediate discharge. I authorize the Greater New Orleans Expressway Commission to investigate any of the information contained on this application, including the examination of past employment records, references, and other facts stated on the application.

I understand that any offer of employment would be contingent upon my providing the Greater New Orleans Expressway Commission with acceptable documents to establish identity and employment eligibility in compliance with law.

If extended a job offer, I consent to have my employment contingent upon successful completion of a medical examination, psychiatric or psychological test, and drug and/or alcohol test if required by the Greater New Orleans Expressway Commission. I also consent to participate in future medical examinations (including drug/alcohol and psychiatric/psychological testing) as may be required by the Greater New Orleans Expressway Commission.

By signing below, I hereby release the GNOEC and its Commissioners and employees from any and all liability and damages in connection with their receipt and lawful use of medical information in connection with my hiring, employment, or separation from the GNOEC.

I agree to wear or use protective clothing or devices as required and to fully comply with all relevant safety rules.

If hired, I agree to conform with all rules and regulations.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_