

LOUISIANA MOTOR COACH

The "New" Choice of New Orleans

NON-Driver Application

APPLICANT INFORMATION <i>(Please print)</i>			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Social Security No.	Desired Salary	Date Available	
Position Applied For:	Type of employment desired	FT <input type="checkbox"/>	PT <input type="checkbox"/>
Are you a citizen of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, are you authorized to work in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Have you ever previously worked for this company? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when?			
Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain			

EDUCATION			
High School		Address	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

Company		Phone ()	
Address			
From	To	Reason for Leaving	
Job Title	Starting Salary \$	Ending Salary\$	
Supervisor & Title			
May we contact your previous supervisor for reference? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Company		Phone ()	
Address			
From	To	Reason for Leaving	
Job Title	Starting Salary \$	Ending Salary\$	
Supervisor & Title			
May we contact your previous supervisor for reference? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Company		Phone ()	
Address			
From	To	Reason for Leaving	
Job Title	Starting Salary \$	Ending Salary\$	
Supervisor & Title			
May we contact your previous supervisor for reference? Yes <input type="checkbox"/> No <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE**IMPORTANT - READ THE FOLLOWING CERTIFICATION AND AGREEMENT CAREFULLY BEFORE SIGNING.**

In completing this application for employment, I certify that the statements I have made are true, complete, correct, and I agree that any willfully false statements or misrepresentations herein, whenever discerned, are just cause for Louisiana Motor Coach either to refuse or to terminate my employment. Further, I authorize any school or former employer to disclose to Louisiana Motor Coach upon request any information they may have as to my record, performance, and attendance and will hold such schools and employers harmless for such disclosure. I agree to take the required drug screening test following an offer of employment. I understand that this application becomes void after 90 days unless renewed personally or in writing by me. I have read and do understand and subscribe to this certification and agreement.

In consideration of my employment, I agree to confirm to the policies of Louisiana Motor Coach. I also agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at my option or at the option of Louisiana Motor Coach

Signature	Date
-----------	------