



Louisiana Department of Justice

Student
Pre-Employment Application

Jeff Landry
Attorney General

The Louisiana Department of Justice is an Equal Opportunity Employer. All appointments are based on merit qualifications – without regard to race, color, creed, religion, sex, national origin, sexual orientation, age, marital, or veteran status or the presence of a non-job-related medical condition or disability. If you are disabled and need an accommodation in the employment process, please contact our office at:

Louisiana Department of Justice
Human Resources Section
P.O. Box 94005
Baton Rouge, LA 70804
Phone: 225.326.6725
Fax: 225.326.6795

Applicant Information

Please type or print your responses to all questions on this application. If no response is necessary or applicable, please indicate “none” or “n/a.” Use any additional space as necessary for responses. Although it is not required, a resume may be attached to this form.

Full Name: _____

Mailing Address: _____

Physical Address: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____ Are you 18 or older? YES NO

Area of Interest: Law Clerk Student Worker Volunteer

Other: _____

Educational History

Beginning with the 9th grade, please identify all schools that you have attended including colleges and universities, business schools, trade schools, and military service schools.

High School

Name: _____

Address: _____

Dates Attended: _____

Highest Grade Completed: _____ Graduation Date: _____ GED Date: _____

Awards, Honors, and Special Achievements: _____

College or University

Name: _____

Address: _____

Dates Attended: _____

Major(s) or Principal Field of Study: _____

Credit Hours: _____ Degree and Date Awarded: _____

Awards, Honors, and Special Achievements: _____

Graduate School

Name: _____

Address: _____

Dates Attended: _____

Major(s) or Principal Field of Study: _____

Credit Hours: _____ Degree and Date Awarded: _____

Awards, Honors, and Special Achievements: _____

Other School

Name: _____

Address: _____

Dates Attended: _____

Major(s) or Principal Field of Study: _____

Credit Hours: _____ Degree and Date Awarded: _____

Awards, Honors, and Special Achievements: _____

Employment History

Beginning with your current or most recent – please describe your employment history including military, part-time, temporary, and volunteer positions. If you have held more than one position with the same employer, please list each position separately.

Employer Name: _____

Address: _____

Contact Number: _____ Dates of Employment: _____

Avg. Hours Worked Per Week: _____ Starting Salary: _____ Ending Salary: _____

Position Title: _____ Duties and Responsibilities: _____

Reason for Leaving: _____

Name and Title of Immediate Supervisor: _____

May we contact your employer and immediate supervisor? YES NO

Employer Name: _____

Address: _____

Contact Number: _____ Dates of Employment: _____

Avg. Hours Worked Per Week: _____ Starting Salary: _____ Ending Salary: _____

Position Title: _____ Duties and Responsibilities: _____

Reason for Leaving: _____

Name and Title of Immediate Supervisor: _____

May we contact your employer and immediate supervisor? YES NO

Employer Name: _____

Address: _____

Contact Number: _____ Dates of Employment: _____

Avg. Hours Worked Per Week: _____ Starting Salary: _____ Ending Salary: _____

Position Title: _____ Duties and Responsibilities: _____

Reason for Leaving: _____

Name and Title of Immediate Supervisor: _____

May we contact your employer and immediate supervisor? YES NO

Certification

- Have you ever been expelled, suspended, disciplined, or cited for an honor violation from any school? ___ YES ___ NO
- Have you ever been terminated, suspended, or disciplined from any place of employment? ___ YES ___ NO
- Have you ever resigned to avoid termination, suspension, or discipline from any place of employment? ___ YES ___ NO
- Have you ever been disciplined or sanctioned for any ethical or professional violation? ___ YES ___ NO
- Have you ever been the driver of a vehicle involved in a motor vehicle accident? ___ YES ___ NO
- Do you have any relatives or close personal friends that are employed by the Louisiana Department of Justice? ___ YES ___ NO
- Have you ever been a candidate for an elected or appointed political office? ___ YES ___ NO
- Do you have any financial, professional, or personal relationships that might conflict with the Louisiana Department of Justice or Attorney General Jeff Landry? ___ YES ___ NO
- Would you be unable to provide proof or authorization to work in the United States within three days of an offer of employment? ___ YES ___ NO

If you answered YES to any of the above questions, explain the circumstances:

To the best of my knowledge and belief – my statements on this form and any attachments to it are true, complete, correct, and made in good faith. I understand that intentional misrepresentations or failure to disclose relevant information in the application process may cause my application to be rejected, or my employment with the Louisiana Department of Justice to be terminated. I understand that a criminal background check will be performed on all applicants prior to employment. Upon request, I agree to provide supporting documentation for any statement made in my application. If I am appointed, I agree to promptly notify the proper agency official of any change in my status as a student – including any reduction in courses taken, termination of student status, or scholastic probation.

Signature: _____ **Date:** _____

Student Information
Student Workers and Law Clerks

Name: _____

Address: _____

Are you currently a full-time student? ___ YES ___ NO

School, College, or University you are now attending or last attended:

Current Grade/ Classification:

_____ High School _____ College _____ Graduate School

If you are not presently attending school:

Where were you last registered? _____

When do you plan to return to school? _____

REPORT OF SCHOOL OFFICIAL

YES NO

_____	_____	Above is classified as a full-time student of this school under its criteria.
_____	_____	Above has completed his/ her course and achieved a diploma or certificate.
_____	_____	Above has applied for enrollment in this school effective _____.
_____	_____	My school is accredited.
_____	_____	My school is approved by the State in which it is located.

Current Grade/ Classification: _____

Name of Institution: _____

Address: _____

Name of School Official: _____ Title: _____

Signature: _____ Date: _____

NOTE: This document must be stamped with an official school, college, or university seal and must be returned to the Human Resources Section of the Louisiana Department of Justice, Office of the Attorney General along with the student pre-employment application to be considered for employment as a Student Worker or a Law Clerk.