

## **EMPLOYMENT**



Date:

Please print clearly in ink and complete all information requested.

PERSONAL INFORMATION			
Last Name	First Name		M.I.
Street Address	City	State	Zip
Home Phone:	Cellular Phone:		
Email Address:	Preferred Contact:		Best time to call: ☐ Day ☐ Evening
If hired, can you provide proof that you are	eligible to work in the l	United States?	Yes No
Have you ever been convicted of a crime o	ther than a minor traffic	c violation?	🗌 Yes 🗌 No
(A "yes" answer to this question does not automatically disqualify you for employment, but will be considered in relationship to the job requirements.)			
If Yes, Please provide Date of Conviction, State, and Offense for which convicted:			
How did you learn about this opening?			

POSITION DESIRED			
Position applying for:	Date available:	Type of work desired:	Available for weekend
		Full Time	work? 🗌 Yes 🗌 No
		🗌 Part Time	

EDUCATION AND TRAINING				
Type of School	Name and Location	No. of Years Completed	Did you Graduate?	Major & Degree
High School / GED			🗌 Yes 🗌 No	
Business / Trade or Technical School			🗌 Yes 🗌 No	
College(s) or Universities			🗌 Yes 🗌 No	
Are you attending school c ☐ Yes ☐ No	or training courses now?	Name/Course of	Study:	

SPECIAL SKILLS	
Licenses/Certifications:	Answer only if position applied for requires a driver's license. Do you have a valid driver's license issued by the State of Oklahoma? ☐ Yes ☐ No
Computer Programs:	
Special Equipment:	
List Foreign Language(s) (optional): Language:	<ul> <li>Write</li> <li>Interpret and/or translate</li> <li>Write</li> <li>Interpret and/or translate</li> </ul>
Do you have any other experience, training, qualifications for the position applied for? If yes, please explain.	s, or skills which you feel make you especially suited

REFERENCES			
Full Name	Address	Phone Number	Relationship

## EMPLOYMENT HISTORY

- Please provide detail; do not use "see resume".
- Start with your current or last job include armed forces service and self-employment.
- Any change of job title under the same employer should be considered a separate position.
- Attach additional pages if necessary.

May we contact your current employer for a	a reference?	Not Applicable
1. Employer	Telephone No.	Supervisor's Name
Type of Business	Address	
Your Job Title	Dates of Employment (month/year)Average Hours WorkeFrom:To:Per Week:	
Duties:		
Monthly Salary:	Reason for Leaving:	
2. Employer	Telephone No.	Supervisor's Name
Type of Business	Address	
Your Job Title	Dates of Employment (month/year) From: To:	Average Hours Worked Per Week:
Duties:	•	
Monthly Salary:	Reason for Leaving:	
3. Employer	Telephone No.	Supervisor's Name
	Telephone No. Address	Supervisor's Name
3. Employer		Supervisor's Name Average Hours Worked Per Week:
3.   Employer     Type of Business	Address Dates of Employment (month/year)	Average Hours Worked
3.   Employer     Type of Business     Your Job Title	Address Dates of Employment (month/year)	Average Hours Worked
3.     Employer       Type of Business       Your Job Title       Duties:	Address Dates of Employment (month/year) From: To:	Average Hours Worked
3.     Employer       Type of Business       Your Job Title       Duties:       Monthly Salary:	Address Dates of Employment (month/year) From: To: Reason for Leaving:	Average Hours Worked Per Week:
3.       Employer         Type of Business         Your Job Title         Duties:         Monthly Salary:         4.       Employer	Address Dates of Employment (month/year) From: To: Reason for Leaving: Telephone No.	Average Hours Worked Per Week:
3.       Employer         Type of Business         Your Job Title         Duties:         Monthly Salary:         4.       Employer         Type of Business	Address         Dates of Employment (month/year)         From:       To:         Reason for Leaving:         Telephone No.         Address         Dates of Employment (month/year)	Average Hours Worked Per Week: Supervisor's Name

I am applying for employment as described above.

I certify that all information in this Application is true and correct, and that no material information has been omitted. I also certify that I am fully qualified and authorized to perform the services for the Company for which I am applying, and that I have not (a) been convicted of any crime related to drugs, alcohol, abuse of any person, or fraud, (b) been barred from working for a company that bills Medicare, (c) had my license to perform the services revoked or limited, or (d) been required to register as any type of sex offender. I further certify that I have a valid Oklahoma driver's license that has not been suspended unless my duties will not include driving. The Company relies upon the accuracy of information contained in the employment application, as well as the accuracy of other data presented throughout the hiring process and employment. Any misrepresentations, falsifications, or material omissions in any of this information or data may result in the Company's exclusion of the individual from further consideration for employment or, if the person has been hired, may result in termination of employment.

I agree that any offer of employment may be conditioned on my taking and passing a complete physical and medical examination. I agree to allow such a medical examination (at the Company's expense except as stated below) and to furnish all such medical and other records. I authorize any physician who has ever examined or treated me to give the Company a complete record of his/her findings and opinions, after the Company has made me a conditional offer of employment. I will sign all HIPAA Authorizations that a healthcare provider may require for the provider to furnish such information to me. If I do not sign such a HIPAA Authorization, I will pay for the services of such healthcare provider.

I also understand that the Company requires its employees to be drug-free. If the Company adopts a Drug Testing policy, I will be furnished a copy of such policy and agree to comply with the pre- or post-employment testing described in such policy.

The Company is an Equal Employment Opportunity employer. It does not discriminate against applicants or employees on the basis of age, race, color, religion, a qualified disability (as defined in the ADA), sex, status as a Vietnam Veteran, or any other basis on which the Company is prohibited from discriminating.

If the Company is not sure whether I can perform the offered job without reasonable accommodations, I agree to cooperate with the Company in trying to develop reasonable accommodations.

I agree that if I am hired, I will be an employee at will and may resign or may be dismissed at any time with or without cause. The Company has limited the authority to make employment contracts that assure that the employee will be employed for a defined term, or that the employee may not be dismissed except for cause, to the Company's Chief Executive Officer who must make any such contract in writing.

The Company uses third parties to assist it in evaluating employment applications. It obtains information from employment and credit reporting agencies, as well as information from medical data banks and similar sources. If the Company makes an adverse decision based on information that is considered a credit report (which includes some reports on employees as well as pure credit reports), it will advise the applicant in writing and will give the applicant the rights available under Federal law to review and correct the credit reporting information.

I authorize the references that I have listed to furnish all information regarding me and my fitness for the employment for which I am applying.

I release all persons who provide information to the Company from all claims or liabilities relating to the information furnished.

Signature:

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

(This application will not be considered without your signature.)