

Office of the Oklahoma State Treasurer's Office Employment Application

Date of Application: _____

Name: (Last) _____ (First) _____

Home Address: (Include City, State, Zip) _____

Primary Contact number: (_____) _____ Primary Email address _____

Position(s) Desired: _____

Full Time Y N Part-time Y N Shift Work Y N Travel Y N

If selected, date available? _____ How did you hear about this position? _____

Are you related to anyone currently employed at the Office of the Oklahoma State Treasurer? Y N

Are you eligible to work in the U.S.? (Proof of work eligibility status will be required upon employment.)

____ Yes ____ No

Are you currently a full time student? Y N

If yes, when do you expect to graduate? _____

Have you ever been fired or laid off from a job(s)? Y N If yes, please explain _____

E D U C A T I O N

Name and Location	Years completed	Field of Study Major/Minor	Degree

Types of Profession or Trade Licenses of Certificates: _____

State or Other License/Certificate Authority: _____

Number(s) and date(s): _____

Any continuing education, skills or special training you feel beneficial in considering you for this position:

List business, trade or civil activities and offices held. List any special honors received (*you may exclude memberships that may reveal gender, race, religion, national origin, age, disability or other protected status*)

References: provide the name and contact information of three professional references who are not related to you.

EXPERIENCE: Start with your most current job and work back. List each different position you have held, even if they were with the same employer. Include experience in volunteer organizations. Attach additional sheets if necessary. Employers and supervisors may be contacted regarding your work experience. On a separate sheet of paper, please list periods of time not worked, reasons for not working and what you were doing.

Employer's Name and Address: _____
_____ Telephone: _____

Exact title of your position: _____

From: _____ To: _____

Primary duties: _____

Average hours per week: _____ Ending salary: _____

Supervisor name, title and contact info: _____

Reason for leaving or seeking to leave _____

May we contact? Y N If no, please explain: _____

Employer's Name and Address: _____
_____ Telephone: _____

Exact title of your position: _____

From: _____ To: _____

Primary duties: _____

Average hours per week: _____ Ending salary: _____

Supervisor name, title and contact info: _____

Reason for leaving: _____

May we contact? Y N If no, please explain: _____

Employer's Name and Address: _____

_____ Telephone: _____

Exact title of your position: _____

From: _____ To: _____

Primary duties: _____

Average hours per week: _____ Ending salary: _____

Supervisor name, title and contact info: _____

Reason for leaving: _____

May we contact? Y N If no, please explain: _____

Employer's Name and Address: _____

_____ Telephone: _____

Exact title of your position: _____

From: _____ To: _____

Primary duties: _____

Average hours per week: _____ Ending salary: _____

Supervisor name, title and contact info: _____

Reason for leaving: _____

May we contact? Y N If no, please explain: _____

I certify, subject to the penalties provided by law, that all information given by me in regard to this application for employment with the Oklahoma State Treasurer's Office is complete and correct to the best of my knowledge and belief. You are authorized to make any contacts necessary to verify the information I have submitted or to seek further information.

I also understand that nothing contained in the application or in the granting of an interview creates a contract between the Treasurer's Office for my employment other than my services, and I understand that I have the right to terminate my employment at any time, and that the Treasurer's Office has that same right.

I understand, if granted employment, a background check will be performed. If the results of the background check are not satisfactory, I understand my employment will be forfeited.

Signed: _____ Date: _____

Signature of Applicant

