

P.O. Box 99 \* 106 S. Main St. \* Elmore City, OK 73433 \* (580) 788-2345 \* (580) 788-2346 (fax)

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POSITION APPLIED FOR				
			THE RESERVE TO BE SEEN TO SEE THE TOTAL	and the same of th
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	GENEKAL INFO	RMATION		
Name (last, first, middle initial)		Social Securit	iy# D.L.#	
	Office		State,	Zip
Mailing & Street Address	. City,		State,	2,1
•				
Home Phone No.	Cell Phone No.		Work Phone No.	
( ) -	( ) -		( ) -	
May we contact your present employer? Y	N			
Are you authorized to work in the United States? Y	, N	<b>.</b>		
	TRAINING AND E	DŮĆATĨOŇ		
CIRCLE HIGHEST GRADE COMPL	ETED: HS GRAD GE	ID YO-TI	CH COLLEGE	MASTERS PHd
, Scliool	Major/subject		Degree/certificates	
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The state of the s	skills relevant to the job fo TYPE OF EXP			S EXPERIENCE
SKILL/EQUIPMENT	TIPE OF BAL	EMENT CO		
Clerical Skills, Computer & Software, Specialized Training				
Specialized Training, Licenses,				
CLEET Certification, K-9			-	
Emergency Medical Responder				
Public Works, Water & Wastewater				
Can you perform the essential function	ns of the job you are applyi	ng for without	faccommodation?	Ă N
lf you answered no, what accommoda	tions will you need?	*************		
Do you have a valid Oklahoma State I		Yeś No		
(If position applied for involves driving	g), have you been convicted	d, pleaded no	contest or paid a fine	tor any trattic
violations in the past three (3) years?	Yes No	lf yes pl	ease explain:	

Have you been convicted of a felony or served time in Conviction will not necessarily bar you from employ	in prison within the last ter ment. If yes, please explai	n (10) years? Y N	ш <sub>Ст</sub>	
How/where did you hear about the position for whom Friend or relative Newspaper Other please specify	ich you are applying? (Ch City employee	éck one) Employment Security	-	
Beginning with your present or most recent employn military service, volunteer experience and periods of a resume is submitted.	nent, list your employment unemployment. The follo	history. Include self-employment, wing sections MUST be completed even	ıi	
Employer	From:	то:		
Employer	From:	То:		
Employer	. From:	То:	-,	
Employer	From:	. To:	<u>'</u>	
Employer	From:	To:		
Employer	From:	, , ,	_	
Employer	From:	To:		
Employer	From:	To:		
REFERÊNCES		To:		
Please list two personal references and two business r	eferences for contact.	Phone ( ) Phone ( ) Phone ( )		
It is understood and agreed that the foregoing is true application will be grounds for elimination from further lismissal. I authorize the City of Elmore City to solicity or evious employment, and similar background information. I release all parties and persons connected and damages that may arise out of the furnishing of such my liability for future references it may provide regarding understand that employment with the Employer is "atminished the employment relationship at any time, with continued on that basis. I understand that no supervisor is any authority to alter the foregoing.	er consideration or, if empter information regarding mation, and to contact any awith any such request for information. If employed, g my work history with the will", which means that eit or without prior notice, and manager or executive of	loyed by the City of Elmore City, for a character, general reputation, credit, and all references I have given on my information from all claims, liabilities, I release the City of Elmore City from a City of Elmore City from the City of Elmore City.		
int's signatureDate				