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OKLAHOMA DEPARTMENT OF HUMAN SERVICES



Application for Employment Information on this form is subject to verification

Submit your application to:

Human Resources Management Division (HRMD), P.O. Box 25352, Oklahoma City, OK 73125 or FAX 405-521-6902, or attach application to an e-mail and send to jobs@okdhs.org. If using PDF version of this form, it must be mailed or faxed. Applications must be received by 5:00 p.m. of the announcement closing date. For assistance contact Employment Services Unit at 405-521-3613.

Announcement number	Classif	Classification/job family descriptor (JFD)				JFD) C	Closing date	
Applicant's information: If using Microsoft Word all blocks expand.								
Name (include first, middle initial, and last)					Social Security number			
Include any other name(s) you have worked under								
E-mail address (optional)				Area	a code Main phone number			
Home street address		City	State			State	Zip	
Mailing address, if different								
Current employer HRMD use only								
Are you currently or have you ever worked for OKDHS or any other Oklahoma State agency? Yes No Specify:								
If you are applying under the provisions for re-instatement please check here								
Education: If high school is listed do not include year of graduation.								
College/University/School	Lo	Location			Attendance (MM/YY to MM/YY)			
Type of degree or certifica	te M	Major			Graduated (MM/YY)			
Semester hours completed (required if you did not graduate)			Semester hours in Computer Science/ Information Technology (IT) jobs only					

Second highest education level

College/University/School	Location		Attendance	e (MM/YY to	MM/YY)		
Type of degree or certificate	Major		Graduated	(MM/YY)			
Semester hours completed (required if you did not graduate)		Semester hours in Computer Science Information Technology (IT jobs only)			Science/ nly)		
Registration, certification, or licensure type		Granted by		Valid through date			

Qualifying experience:

List a minimum of the last seven years of employment history and all jobs that include relevant experience for the position that you are seeking. Complete all blocks for each job listed. If using Microsoft Word, the blocks expand. If you want to include more than four positions you may attach additional sheets with identical information. If the information on this form is incomplete, approval of eligibility may be delayed or denied.

1. Job title	Employer and location			Average hours per week			
Began (mm/dd/yy)	Ended (mm/dd/yy)	Ending salary		Reason for leaving			
Description of duties							
Supervisor's name, title, a	and contact number	Did you supervise any employees? ☐ Yes ☐ No					
2. Job title	Employer and locat	ion	Average hours per week				
Began (mm/dd/yy)	Ended (mm/dd/yy)	Ending salary		Reason for leaving			
Description of duties							
Supervisor's name, title, a	Did you supervise any employees? ☐ Yes ☐ No						

3. Job title	Employer and location Ave		Average	ge hours per week		
Began (mm/dd/yy)	Ended (mm/dd/yy)	Ending salary		Reason for leaving		
Description of duties						
Supervisor's name, title, and contact number						
4. Job title	Employer and location	1	Average hours per week			
Began (mm/dd/yy)	Ended (mm/dd/yy)	Ending sa	alary	Reason for leaving		
Description of duties						
Supervisor's name, title, and contact number Did you supervise any employees?						
Check all of the following that apply:						
Are you seeking part-time employment?						
Special qualifications						
Software skills: Excel Access Word Other Specify: Manual sign language Bilingual skills Indicate language other than English:						
Have you ever been terminated or resigned from employment in lieu of being terminated?						
Have you had a protective order entered against you pursuant to the Oklahoma Protection from Domestic Abuse Act or a similar statute of another state? Yes No If yes, provide the name of the court and court number:						

Have you ever pled guilty or no contest to a crime other than a minor traffic offense? Have you ever been convicted of a crime other than a minor traffic offense? Yes No Yes No If the answer to either question is yes, please explain:							
Job-related references	- Pleas		Ι	.			
Name		Address	Area code	Daytime phone			
OKDHS policy does not allow some family members to be employed within the same supervisory group or unit. Please list the names of all your relatives now employed by OKDHS. If more than two, continue on an attached sheet.							
Name(s)		Relationship	Employed at				
Sections 358(B) and 359(B) of Title 21 of the Oklahoma Statutes prohibits applicants for state employment from knowingly making materially false statements or representation on an employment application. Violation is a criminal offense, punishable by fine and/or imprisonment. By submitting this form in paper or electronic format, I represent that the information provided is true and accurate.							
I authorize OKDHS to perform a criminal background check and/or driving record check if required for this job. I authorize any current or previous employer to disclose my job performance and work history.							
All applicants for employment with OKDHS receiving a conditional offer of employment must pass a drug test pursuant to the drug testing policy of OKDHS (OAC 340:2-1-40 through 340:2-1-44). To obtain a copy of this policy, go to http://www.okdhs.org/library/policy/oac340/002/01 .							
If this application is submitted as an attachment to e-mail, you will be required to sign a printed copy if invited to interview.							
Signature of employee/applicant Date							