

Office of the Oklahoma State Treasurer

Employment Application

Date of Application: \_\_\_\_\_

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Home Address: (Include City, State, Zip) \_\_\_\_\_

Telephone: (Day) ( ) \_\_\_\_\_ (Night) ( ) \_\_\_\_\_

Alternate number where you can be reached and the name of the person at that number:  
\_\_\_\_\_

Position 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 citizenship or immigration status will be required upon employment.) \_\_\_\_ Yes \_\_\_\_ No

Have you ever been convicted of a crime other than minor traffic violations? Y N

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Have you ever been fired from a job? Y N If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

EDUCATION

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

Type of Profession or Trade License of Certificate: \_\_\_\_\_

State or Other License/Certificate Authority: \_\_\_\_\_

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

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

Give the name and contact information of three business 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 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.

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Employer's Name and Address: \_\_\_\_\_  
\_\_\_\_\_ Telephone: \_\_\_\_\_

Exact title of your position: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Average hours per week: \_\_\_\_\_ Ending or current salary: \_\_\_\_\_

Supervisor name/title: \_\_\_\_\_

Reason for leaving or desiring to leave: \_\_\_\_\_

Maybe we contact? Y N If no, please explain: \_\_\_\_\_

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Employer's Name and Address: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Exact title of your position: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Average hours per week: \_\_\_\_\_ Ending salary: \_\_\_\_\_

Supervisor name/title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Maybe we contact? Y N If no, please explain: \_\_\_\_\_

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Employer's Name and Address: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Exact title of your position: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Average hours per week: \_\_\_\_\_ Ending salary: \_\_\_\_\_

Supervisor name/title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Maybe we contact? Y N If no, please explain: \_\_\_\_\_

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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 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