

Ineligibility for Rehire

INTERNAL USE ONLY

Name: _____

Title: _____ Employee ID#: _____

Work Location: _____ Separation Date: _____

I certify that the above employee left employment with the Oklahoma Department of Corrections for the following reason (check all applicable and attach supporting documentation):

- _____ 1. The employee resigned during an investigation. The number of the investigation is _____.
- _____ 2. The employee resigned in lieu of disciplinary action. (Attach proposed disciplinary letter and/or supporting documentation).
MPC Case # _____ (If applicable)
- _____ 3. The employee failed to report for duty (Attach time sheet).
- _____ 4. The employee refused to take an alcohol or drug test (Attach referral to alcohol or drug testing).
- _____ 5. The employee resigned or was discharged based on bringing contraband, as defined in OP-040109, "Control of Contraband and Physical Evidence", into the facility (Attach termination letter and/or supporting documentation).
- _____ 6. The employee resigned or was discharged for a drug free workplace violation (Attach termination letter and/or supporting documentation).
- _____ 7. The employee resigned or was discharged for failure to cooperate in an investigation or making a materially false statement to an investigator (Attach termination letter and/or supporting documentation).
- _____ 8. The employee resigned or was discharged following substantiated allegations of sexual abuse or sexual harassment (P.R.E.A. § 115.17).
- _____ 9. The employee resigned or was discharged following substantiated allegations of workplace violence (Attach termination letter and/or supporting documentation).

Date: _____

Appointing Authority: _____

Distribution: Personnel file
Central Human Resource Unit