

Please give accurate, complete employment record. Start with present or most recent employer.

Company/Organization	Telephone:
Address:	Employed From: Month/Year _____ Employed Until: Month/Year _____
Name of Supervisor:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Job Title and Type of Duties Performed:	Reason for Leaving:

Company/Organization	Telephone:
Address:	Employed From: Month/Year _____ Employed Until: Month/Year _____
Name of Supervisor:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Job Title and Type of Duties Performed:	Reason for Leaving:

Company/Organization	Telephone:
Address:	Employed From: Month/Year _____ Employed Until: Month/Year _____
Name of Supervisor:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Job Title and Type of Duties Performed:	Reason for Leaving:

May we contact employers listed above in regard to your job performance?

Yes No

If no, please explain _____

Please list additional skills or training applicable to the position for which you have applied. Be specific as to the type of skills training, including any equipment which you have experience operating.

Oklahoma Employment Commission

Newspaper or Professional Publication

Other State Agency

Other (specify) _____

Walk-in

I hereby declare the information that I have provided in the Application of Employment is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.

This application will be retained on file for no more than one year. If I am not hired during that period of time, I must complete a new application in order to be considered for employment. It is my responsibility to notify Personnel Services of my intent to apply for any position opening available with Liberty Public Schools.

I understand that if I am a relative of an employee of Liberty Public Schools I may apply for any position vacancy except those positions which would place me in the same division or work area in which a relative is currently employed which would create a supervisory/subordinate relationship.

I understand that a person cannot be hired for a position funded under the Job Training Partnership Act if they are a member of the supervisory staff's "immediate family" (wife, husband, son daughter, mother, father, brother, sister, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother-in-law, father-in-law, aunt, uncle, niece, nephew, step-parent, step-child, grandfather, grandmother, grandson and granddaughter). I hereby certify that I am not related, as specified above, to a person serving in a supervisory position funded under the Act.

I understand that completing this application does not create an employer-employee relationship but only shows my desire to seek employment with Liberty Public Schools.

Date

Signature

EEO Statement

We are an Equal Opportunity Employer and Educator who fully and actively supports equal access for all people, regardless of Race, Color, Religion, Gender, Age, National Origin, Veteran Status, Disability or Genetic Information, Family and Medical Leave. Additionally, we prohibit Retaliation against individuals who oppose such discrimination and harassment or who participate in an equal opportunity investigation.