

City of Crescent EMPLOYMENT APPLICATION

PO Box 561 205 North Grand Crescent, OK 73028 Office: 405-969-2538 Fax: 405-969-3775

The City of Crescent does not discriminate on the basis of race, color, creed, genetic information, ethnicity, religion, age, sex, marital status, political affiliation, national origin, ancestry or disability.

APPLICANT INFORMATION (Please Print Clearly)

Social Security Number:		Date of Application:		
Name:		First		Middle
Last		FIISt		Middle
Mailing Address:	Street Address, Apt #	City		Zip Code
County:	_ E-mail address			
Evening Telephone:		Day Telephone:		
	(Include area code)		(Include area code))
Job Desired:				
Expected Range of	Compensation	Date Available for E	Employment	
\$	\$			
Have you ever been o	convicted of a crime?			
If Yes, please explain				
Have you ever been t				
☐ Yes ☐ N				
If Yes, please explain	<u>t:</u>			
Have you ever worke	ed for the City of Crescent	·9		
☐ Yes ☐ N	<u> </u>	•		
If yes, when?	What departmen	nt? Reaso	on for separation:	
Do you have any rela	ntive working for the City	of Crescent?		
☐ Yes ☐ N				
		Relationship to you?		
_				
Who referred you to	this position?		-	
Indicate the condition	ns under which you will ac	ccept employment (Yes or	No - If blank, YES	S is assumed)
Full-time:	Part-time:	Shift work:		
Travel:	(Travel may include reg	gular overnight or across to	own assignments)	
	ears of age? (Yes o	r No) Are you at least 2 Gide job requirement.)	1 years of age?	(Yes or No)

Education

	Institution	Dates Attended	Degree Obtained	Date Degree Obtained
1		-		
2		-		
3		-		
4		-		

Experience

Start with your present job and work back. If you had more than three (3) separate periods of employment over the last ten years, attach additional form as below. Employers and supervisors may be contacted regarding your work experience.

	Employer	Dates of Emplo	yment		
1	-				
	Title		Annual Salary \$		
	Supervisor's Name	Supervisor's Title	Office Phone		
	Supervisor s ivame	Supervisor's True	Office I none		
	Duties (Be specific. Attach addi	tional pages if needed or note "See Resu	me.")		
	Reason for Leaving				
	Reason for Leaving				
	Employer	Dates of Employment			
2		-			
	Title		Annual Salary		
		G	\$		
	Supervisor's Name	Supervisor's Title	Office Phone		
	D-4: (D: C A441 - 11	4 1	22)		
	Duties (Be specific. Attach addi	tional pages if needed or note "See Resu	me.)		
	Reason for Leaving				
	Employer	Dates of Employment			
3	T:41-	- Amural Calamy			
	Title		Annual Salary \$		
	Supervisor's Name	Supervisor's Title	Office Phone		
	Supervisor s Ivame	Supervisor s ritic	Office I hone		
	Duties (Be specific. Attach additional pages if needed or note "See Resume.")				
	1 0 ,				
	Reason for Leaving				
	Employer	Dates of Employment			
4	TD: 43	<u>-</u>	16.1		
	Title Annual Salary				
	C	C	\$		
	Supervisor's Name	Supervisor's Title	Office Phone		

	Duties (Be specific. Attach additional pages if needed or note "See Resume.")					
	Decree for Leaving					
	Reason for Leaving					
	Employer Dates of Employment					
5						
	Title			Annual Salary \$		
	Supervisor's Name	Supervisor'	s Title	Office Phone		
	Duties (Be specific. Attach	additional pages if	needed or note "See	Resume.")		
	Reason for Leaving					
	Employer		Dates of E	nployment	\neg	
6	Title			- Annual Salary		
				\$		
	Supervisor's Name	Supervisor'	s Title	Office Phone		
	Duties (Be specific. Attach	additional pages if	Fneeded or note "See	Pasuma ")		
	Duties (De specific. Attaci	i additional pages in	needed of note See	icsume.)		
	Reason for Leaving					
Refe	erences					
	Name	Years Known	Relationship	Phone		
2						
3						
4						
5						
May	we contact your references?					
Ш	Yes No					
What	t job (or activity) have you n	nost enjoyed? and w	vhy?			
What	t job (or activity) have you le	east enjoyed? and w	hy?			
Ic the	are enviling also very weekla	lika us ta knaw aka	ut vou?			
is the	ere anything else you would	iike us to know abo	ut you?			

PLEASE READ BEFORE SIGNING

I understand and agree that:

- 1. Any material misrepresentation or deliberate omission of a fact in my application may be justification for refusal of employment, or if employed, termination from employment.
- 2. It is my understanding that the City of Crescent may make a thorough investigation and may verify all data given in this application. I hereby authorize my present and previous employers and educational institutions to provide information requested by the City of Crescent.
- 3. I understand and provide authorization for any and all criminal background checks as diem necessary and I will provide any documentation requested, including but not limited to my state issued license.
- 4. I agree that my employment may be terminated by the City of Crescent any time without liability for wages or salary except such as may have been earned at the time of such termination.
- 5. Business needs may at times make the following conditions mandatory: overtime, shiftwork, a rotation schedule, or a work schedule other than Monday through Friday.
- 6. City of Crescent reserves the right to request a pre-employment (post-offer) physical examination and comprehensive drug testing as a normal part of the selection process.
- 7. Nothing on the application is intended to create or imply a contractual relationship; if hired, the employee understands that employment is at will, i.e., that it is not for any specific time period or duration, and can be terminated with or without reason at any time.

This is an application for employment. Employment is not being offered at this time. I understand that if I am employed, such employment is for an indefinite period of time and that the City of Crescent can change wages, benefits, and conditions at any time.

If employed, I will comply with all rules and regulations as set forth in the City of Crescent Personnel Policy and other policies as established by departmental procedures.

I have read or have had this application read to me and understand all statements and questions contained in the application for employment, and have answered to the best of my ability.

You may contact my present employer? ☐ Yes ☐ No		
Applicant's Signature	Date	
DO NOT WRI	TE IN THIS AREA – FOR OFFICE USE ONLY	
Copy of Driver's License OSBI/Criminal Checked? Background Checked? References Checked?	Other?	
Notes:		
Eligible for Hire?		
Date Hired	Starting Pay	
Terms of Employment		