

Employment Application

103 SE 2ND ANTLERS, OK 74523 PHONE: (580) 298-5513 FAX:(580) 298-6440 antlerspolicedepartment@yahoo.com

		Applicant	Inform	ation			100
Full Name:	Last	First				OB:	IATE SAID
	Lust	riist			M.I.		
Address:	Street Address	ā			¥	Apartment/Unit #	
	City				State	ZIP Code	
Phone:			Email				
Date Availab	ole:	Driver's License #:			State:		
Position App	lied for:					(2) (2) (2)	
	eligible for employment i	n the YES NO			ermanent position;	<u> </u>	0
Have you eve	er worked for this compa	YES NO	f yes, who	en?			
Have you ever been convicted of a felony or YES NO Class A misdemeanor(I.e. Domestic Violence)							
If yes, explain:							
	可能以多数数据数据	Edu	cation		多种价格 基础		
High School:		Address	S				
From:	То:	Did you graduate	YES ? 🔲	NO	Diploma:		
College:		Address):				
From:	To:	Did you graduate	YES	NO	Degree:		
Other:		Address	Ü				
From:	To:	Did you graduate?	YES P 🔲	NO	Degree:		

CVENE SAMEAN	Refe	erences				
Please list three pro	ofessional references.			A 10 3 - 100 A		
Full Name:				Relationship:		
0				Phone:		
Address:						
Full Name:				Relationship:		
•				Phone:		
Λ al al						
Full Name:				Relationship:	-	
0				Phone:		
A -1 -1						
KRYMENIOS II	Previous	Employm	ent			
Company:				Phone:		
Addross:						
Job Title:	Starting Salary:\$			Ending Salary:\$		
Responsibilities:						
_	To:					
May we contact your	previous supervisor for a reference?	YES	NO			
Company:				Phone:		
Address:				Supervisor:		
Job Title:	Starting S	Starting Salary:\$			Ending Salary:\$	
Responsibilities:		_				
	To:					
May we contact your p	previous supervisor for a reference?	YES	NO			
Company:				Phone:		
A ddroes.				Supervisor:		
Job Title:	Starting Salary:\$			Ending Salary:\$		

Responsibilities:				
From:	To:	Reason fo	or Leaving:	
May we contact your pr	evious supervisor for a reference?	YES	NO	
Summarize other emplo	pyment related to this job:			
Volume of the second collection	Military	Service		
Branch:			From:	To:
Rank at Discharge:		Type of	Discharge:	
If other than honorable,	explain:			
	Cor	ntact		第四个文字中文字文章
In case of accident or ill	ness, please contact:		Pho	ne:
Address: Relationship:				
The state of the s	Skills and Q	ualificatio	ins	
Other qualifications such	n as special skills, abilities or honors	that should	be considered:	
Types of computers, sof	tware, and other equipment you are	qualified to	operate or repair:	
Professional licenses, co	ertifications, or registrations:		11	
Additional skills, including to bring to the employer	g supervision skills, other languages s attention	s, or informa	tion regarding the ca	areer/occupation you wish
Typing Speed:	WPM			
	Information To	The Appl	icant	
checked. If you have mist	or processing you employment applica epresented or omitted any facts on thi You may make a written request for in	s application	and are subsequent	v hired you may be
United States, have a phy	ent, you may be required to: supply yo sical examination and/or drug test, or he information shown above.	ur birth certif to sign a con	icate or other proof of filict of interest agreer	authorization to work in the nent and abide by its terms. I
Signature:			Date	e:
Equal Employment Opportunity: \	While many employers are required by federal law to	have an Affirmati	ve Action Program, all employ	ers are required to provide equal

Equal Employment Opportunity: White many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.