

# Central Oklahoma Master Conservancy District

## Employment Application

Please provide sufficient contact information for future communication.

Name \_\_\_\_\_ SSN \_\_\_\_\_

Address \_\_\_\_\_  
Street City State ZIP

Home phone \_\_\_\_\_

Relatives employed by COMCD

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Who referred you to COMCD? \_\_\_\_\_

Type of employment desired \_\_\_\_\_

Job title \_\_\_\_\_ ☐ Full time ☐ Part time

Salary/wage requirement \$ \_\_\_\_\_ Date available \_\_\_\_\_

### Education

Name and location of school	Dates attended	Graduate?	Degree held (if applicable)	Primary course of study	Best subject / Worst subject

Have you ever served in the military? ☐ Yes ☐ No

If yes, dates of service: From \_\_\_\_\_ To \_\_\_\_\_

Rank at time of discharge \_\_\_\_\_ Honorable discharge ☐ Yes ☐ No

Special military schools or training \_\_\_\_\_

### Work History

List all present and past employment, beginning with your most recent job.

1.	Name of company	Employed from	Employed to	Duties and responsibilities
	Company address			Reason for leaving
	Company telephone with area code	Starting salary	Ending salary	
	Name of supervisor	Job title		
2.	Name of company	Employed from	Employed to	Duties and responsibilities
	Company address			Reason for leaving
	Company telephone with area code	Starting salary	Ending salary	
	Name of supervisor	Job title		
3.	Name of company	Employed from	Employed to	Duties and responsibilities
	Company address			Reason for leaving
	Company telephone with area code	Starting salary	Ending salary	
	Name of supervisor	Job title		

May we contact the above employers or references? ☐ Yes ☐ No

If no, indicate by number which employer(s) we may contact \_\_\_\_\_

May we contact you at your present employer? ☐ Yes ☐ No

### References

Please include former supervisors.

1.	Name	Job title	Company	Telephone number
2.	Name	Job title	Company	Telephone number
3.	Name	Job title	Company	Telephone number
4.	Name	Job title	Company	Telephone number

### Skills, abilities, knowledge, and experience

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Accounting       | <input type="checkbox"/> Bookkeeping       | <input type="checkbox"/> Lifting restrictions |
| <input type="checkbox"/> Spreadsheet      | <input type="checkbox"/> Writing skills    | <input type="checkbox"/> Word processing      |
| <input type="checkbox"/> Typing _____ wpm | <input type="checkbox"/> 10-key _____ ksph |   |
| <input type="checkbox"/> Other _____      |  |   |

Computer skills – List specific software, operating systems, programs, etc.

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Additional skills, proficiencies, qualifications, or certifications

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### *Conditions of Employment*

Are you eligible to work in the U.S.? ☐ Yes ☐ No

If you are employed, you will be required to provide document(s) providing eligibility for employment in the US.

Are you bondable? ☐ Yes ☐ No

Bonding is required for certain positions.

Will you submit to a physical examination if required? ☐ Yes ☐ No

Examination would be paid for by the company.

If no, explain \_\_\_\_\_

Will you submit to substance abuse testing if required? ☐ Yes ☐ No

Testing will be paid for by the company

If no, explain \_\_\_\_\_

Have you been found guilty of a felony? ☐ Yes ☐ No

If yes, explain \_\_\_\_\_

Do you have a current Oklahoma Driver's License? ☐ Yes ☐ No

If no, explain \_\_\_\_\_

Employment and advancement at Central Oklahoma Master Conservancy District, is determined by a person's qualifications and abilities, without regard to race, color, age, sex, national origin, physical impairment, or veteran status. It is our policy to treat each individual in a fair and equitable manner.

Understanding the above, I agree to the verification of any and all statements contained in this application and declare that they are true and complete. I authorize previous employers, references named, or any other person(s) to whom the company may refer, to release information requested (except as qualified above). In addition, I grant Central Oklahoma Master Conservancy District, permission to check police records, driving records, and credit history. I further understand that any misrepresentation or falsification of the facts will be sufficient cause for refusal for or termination from employment.

I agree that, if employed, the nature and location of my work assignment may be changed by the Company at any time. I understand that all employees enter on duty under a three-month trial period. I further understand that this application in no way represents an expressed or implied contract of employment and that all employment is considered "at will" employment that may be terminated at any time by either myself or the Company.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_