City of Atoka Police Department
Application for Employment

The City of Atoka is an Equal Opportunity Employer committed to excellence. Employment offers are made on the basis of qualifications, without regard to race, creed, color, gender, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

PLEASE TYPE OR PRINT. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.") You may continue your answers on the back of this application or attach additional sheets if necessary. Applications with missing information will not be considered for any position. Information in this application must be full, complete, truthful and accurate to be considered for employment.

Position Applying For:	Name (Last, First, Middle):		Other names which you have used:
Street Address:		**City, State & Zip:**	
Social Security Number:	**Date of Birth:**	**Home Phone:**	**Other Phone:**

Are you a citizen of the United States?	☐ Yes ☐ No	If not, are you authorized to work in the United States?	
Are you currently employed?	☐ Yes ☐ No	If YES, what date are you available for work?	
Have you ever been employed by the City of Atoka?	☐ Yes ☐ No	If YES, dates of employment & reason for leaving:	
Are you related to any current City of Atoka employee?	☐ Yes ☐ No	If YES, their name & their relationship to you?	
If required for position, do you have a valid driver's license?	☐ **Yes** ☐ **No**	**If YES, State of issuance, license #, and expiration date:**	
Do you have a valid CDL?	☐ Yes ☐ No	If YES, what class of CDL do you hold?	
Are you bondable?	☐ Yes ☐ No		
Have you ever been convicted of a felony or misdemeanor?	☐ Yes ☐ No	If YES, please explain:	

How did you learn about this employment opportunity? Check all that apply: ☐ Ad in *newspaper*
☐ Walk-in   ☐ Referral by employee   ☐ Other:

EDUCATION

	School Name	City, State	Did you graduate?	Degree received	Major
High School:			☐ Yes ☐ No		
GED:			☐ Yes ☐ No		
Other School:			☐ Yes ☐ No		
College:			☐ Yes ☐ No		
Other credentials/ licenses/ professional affiliations, etc., which are relevant to the job(s) for which you are applying.					

SKILLS: Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert)

WORK EXPERIENCE-Please detail your work history. Begin with your <u>current</u> or most recent employer. If you held multiple positions with the same organization, detail each position separately. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments. **PLEASE NOTE**: The City of Atoka reserves the right to contact all current and former employers for reference information.

Dates Employed (most recent position) From: To	☐ Full time ☐ Part-time	Title:
Starting Salary:

Final Salary: | Organization Name and Address: | |
| Supervisor's Name and Title: | Phone #: | Contact my current references: ☐ At any time ☐ Only if I am a finalist candidate |
| Primary duties: | | Reason for Leaving: |

Dates Employed From: To	☐ Full time ☐ Part-time	Title:
Starting Salary:

Final Salary: | Organization Name and Address: | |
| Supervisor's Name, Title and Phone #: | Other Reference Name, Title and Phone #: | Contact my current references: ☐ At any time ☐ Only if I am a finalist candidate |
| Primary duties: | | Reason for Leaving: |

Dates Employed From: To	☐ Full time ☐ Part-time	Title:
Starting Salary:

Final Salary: | Organization Name and Address: | |
| Supervisor's Name, Title and Phone #: | Other Reference Name, Title and Phone #: | Contact my current references: ☐ At any time ☐ Only if I am a finalist candidate |
| Primary duties: | Reason for Leaving: | |

REFERENCES – Please list three personal or professional references. These references cannot be listed anywhere else on this application.

Name	Relationship	Years Known	Phone Number

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is full, complete, truthful and accurate. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize the City of Atoka to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that employees of the City of Atoka serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If I am offered a conditional offer of employment, I will be required to furnish proof of eligibility to work in the United States and to comply with city and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. If employed on a regular, benefits-eligible basis, I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first TWELVE MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Applicant Signature: _____   Date: _____