



**Okmulgee County Criminal Justice
Authority
Applicant Questionnaire & Background
Investigation Form**

Okmulgee County Criminal Justice Authority

Applicant Questionnaire & Background Investigation Form

Part A: To be provided to the interview committee

Part B: To be retained by human resource officer.

Please type or print all responses. Answer all questions (use No, None, or N/A when applicable) with complete and accurate information.

You are responsible for notifying the human resource office if your mailing address, home address, or home or business telephone number changes after submission of this form. An accurate and complete form will help expedite your application. If application is not completed in a thorough manner it can potentially delay the application process and hiring process. Any deliberate omissions or falsifications may result in disqualification.

Name: _____
Last (Print)
Middle (Print)
First (Print)

DOB: _____ Email Address: _____ Position Applying for: _____

Part A: TO BE COMPLETED BY APPLICANT FOR REVIEW DURING INTERVIEW/SELECTION PROCESS

I. CONTACT INFORMATION

Current Address _____
Street Address
Apt. #

City
County
State
Zip Code

Mailing Address (if different): _____

Home Telephone: () _____ **Mobile Telephone:** () _____

Directions to Address: _____

Other telephone number(s) at which you can be contacted: _____ **Relationship:** _____

How did you hear about this position? Career Fair (location) Friend/Family Works for OCCJA (location) _____
 OCCJA Website Newspaper Advertisement Radio Advertisement Other (please specify) _____

II. EDUCATION

Elementary or High School grade completed (Circle one number) _____ Did you graduate or achieve GED? Yes No
 1 2 3 4 5 6 7 8 9 10 11 12

Type of School	Name and Location of School	Dates Attended				Graduated	
		From	To	Yes	No		
HIGH SCHOOL							

Type of School	Name and Location of School	Dates Attended		Number of Sem. Hours Completed	Graduated		Type of Diploma or Degree	Major Field of Study
		From Mo/Yr.	To Mo/Yr.		Yes	No		
COLLEGE OR UNIVERSITY								
TECHNICAL OR VOCATIONAL								

If more than 30 college or university credit hours are completed, you will be required to provide your transcript or diploma to the human resource office.

List all valid licenses/certifications:

Type	License Number	State	Expiration Date

Have any of the above licenses ever been suspended or revoked? Yes, _____ No _____ N/A----- If yes, explain.

List any fluency in foreign languages or sign language. _____

III. MILITARY RECORD

Have you ever served on active duty in the Armed Forces of the United States? Yes No

Branch of military service: _____

Were you ever the subject of formal disciplinary action, such as Honorable Discharge, Court-Martial, etc., while in the service? Yes _____ No _____

If yes, explain: _____

IV. EMPLOYMENT HISTORY

Start with present or most recent employment and work back. Do not omit any periods of employment. Present employer may be contacted regarding applications for all positions that require CLEET peace officer certification or any positions within the correctional officer series.

May we contact your present employer? Yes No

If No, please explain _____

Have you ever received any disciplinary action? Yes No

If yes, please explain _____

Have you ever been named in a workplace complaint or grievance? Yes No

If yes, please explain _____

Have you ever filed a workers' compensation claim? Yes No

If yes, please explain. _____

Employer				Type of business		Full Time	
Mailing Address				Phone #		Part Time	
City and State						Seasonal	
Starting Date		Leaving Date		Starting Position Title		Present or Last Title	
Mo.	Yr.	Mo.	Yr.				
Immediate Supervisor (Name/E-mail Address):							
Briefly describe your duties and responsibilities:							

Reason for leaving:						
Employer Mailing Address City and State				Type of business Phone #		Full Time Part Time Seasonal
Starting Date		Leaving Date		Starting Position Title		Present or Last Title
Mo.	Yr.	Mo.	Yr.			
Immediate Supervisor (Name/E-mail Address):						
Briefly describe your duties and responsibilities:						
Reason for leaving:						

Employer Mailing Address City and State				Type of business Phone #		Full Time Part Time Seasonal
Starting Date		Leaving Date		Starting Position Title		Present or Last Title
Mo.	Yr.	Mo.	Yr.			
Immediate Supervisor (Name/E-mail Address):						
Briefly describe your duties and responsibilities:						
Reason for leaving:						

Employer Mailing Address City and State				Type of business Phone #		Full Time Part Time Seasonal
Starting Date		Leaving Date		Starting Position Title		Present or Last Title
Mo.	Yr.	Mo.	Yr.			
Immediate Supervisor (Name/E-mail Address):						
Briefly describe your duties and responsibilities:						
Reason for leaving:						

Employer Mailing Address City and State				Type of business Phone #		Full Time Part Time Seasonal
Starting Date		Leaving Date		Starting Position Title		Present or Last Title
Mo.	Yr.	Mo.	Yr.			
Immediate Supervisor (Name/E-mail Address):						
Briefly describe your duties and responsibilities:						

Reason for leaving:

Do you have more employment history? Yes _____ No _____
(If Yes, list records on a separate sheet of paper and attach to this application.)

Do you have any employment gaps within your history above? Yes _____ No _____
If yes, please explain.

Completed by Applicant and Retained by the Facility for the Purpose of Complying with State and Federal Record Keeping Requirements.

Social Security Number
(EIN)

Date of Birth
Mo./Day/Yr.

Gender
Male or Female

Race or Ethnic Group (check one)

- Black (not of Hispanic origin)
- Asian or Pacific Islander
- American Indian or Alaskan Native
- Hispanic (Mexican, Puerto Rican, Cuban, Central, or South American or other Spanish culture or origin, regardless of race)
- White (not of Hispanic origin)

V. TRAFFIC AND/OR CRIMINAL HISTORY INFORMATION

Height _____ Weight _____ Eye Color _____ Hair Color _____ Sex _____

Do you have Scars_ Or Tattoos? Yes _____ NO _____

If yes, list a description of each.

List all other names you have used including nicknames, maiden name, and, if applicable, the date of name change: _____

Have you ever been arrested? Yes _____ No _____

Have you ever been charged or convicted of a misdemeanor which involved the use or attempted use of physical force, or threatened use of a deadly weapon towards any current or former spouse or child of whom you are parent or guardian or person with whom you are or have co-habitated or share a child incommon? Yes _____ No _____

Have you ever been charged, or convicted of any offense (including traffic) which involved the illegal usage of drugs or alcohol? Yes _____ No _____

Have you ever been charged, or convicted of any offense involving domestic violence? Yes No

Do you currently engage in any illegal drug usage? Yes No

If yes, explain _____

Do you have a current driver's license? Yes No

If yes, provide driver's license number And State _____

Have you ever had a driver's license suspended, revoked, or canceled? Yes No

If yes, provide reasons, dates, state of issuance and driver's license number _____

Have you ever been convicted of a felony? Yes No

If you have ever been arrested, list the date of arrest, original charge, location of arrest and disposition; dismissed, pled guilty, nolo contendere, deferred or conviction.

Date	Charge	Court, City, & State	Disposition

VI. RELATIVES

Please supply the appropriate information in the spaces provided below. If a category is not applicable, write in "N/A."

If living, name of your:	Address where person can be contacted (Include City, State, and Zip Code)	Telephone at which person can be contacted
Father	() Home () Work () Other	() Home () Work () Other
Mother	() Home () Work () Other	() Home () Work () Other
Spouse	() Home () Work () Other	() Home () Work () Other
Brother(s) and Sister(s)	() Home () Work () Other	() Home () Work () Other
	() Home () Work () Other	() Home () Work () Other
	() Home () Work () Other	() Home () Work () Other

VII. REFERENCES

Below, please list any individuals with whom you have resided during the last six months who are not relatives (list no information prior to your 18th birthday).

Name and E-mail Address	Address where person can be contacted (Include City, State, and Zip Code)	Telephone at which person can be contacted
	() Home () Work () Other	() Home () Work () Other
	() Home () Work () Other	() Home () Work () Other
	() Home () Work () Other	() Home () Work () Other
	() Home () Work () Other	() Home () Work () Other

In the space below, please list as references 3-5 individuals who have professional knowledge of you. Exclude relatives and former employers.

Name and E-mail Address	Address where person can be contacted (Include City, State, and Zip Code)	Telephone at which person can be contacted
	() Home () Work () Other	() Home () Work () Other
	() Home () Work () Other	() Home () Work () Other
	() Home () Work () Other	() Home () Work () Other

	() Home () Work () Other	() Home () Work () Other
	() Home () Work () Other	() Home () Work () Other

VIII. WORK REQUIREMENT INFORMATION

Do you have any relative(s) presently employed by the Okmulgee County Criminal Justice Authority or Department of Corrections? Yes No If yes, list name, relationship, and location:

Do you know any person or have any relative(s) currently under the care, custody, or supervision of the Okmulgee County Criminal Justice Authority or Department of Corrections? (This Question is mandatory based of the nature of the business)

Yes, No If yes, list name, relationship, and location: _____

If offered employment, are you available to start work immediately? Yes No

If no, when are you able to start? _____

If offered employment, is there any reason you would not be able to continuously perform essential job requirements? Yes No If yes, please provide an explanation: _____

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

Social Security Number _____ - _____ - _____

I further certify that all statements and information contained herein are true and complete and I understand that any misstatements or omissions of material fact will result in disqualification or dismissal.

Signature

Date



Okmulgee County Criminal Justice Authority is an equal opportunity employer that is committed to diversity and inclusion in the workplace. We prohibit discrimination and harassment of any kind based on race, color, sex, religion, sexual orientation, national origin, disability, genetic information, pregnancy, or any other protected characteristic as outlined by federal, state, or local laws.

This policy applies to all employment practices within our organization, including hiring, recruiting, promotion, termination, layoff, recall, leave of absence, compensation, benefits, training, and apprenticeship. Okmulgee County Criminal Justice Authority makes hiring decisions based solely on qualifications, merit, and business needs at the time.

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----- CONFIDENTIAL -----