



Employment Application

Oklahoma Public Employees Retirement System
5801 Broadway Ext., Suite 200
Oklahoma City, OK 73118
(405) 858-6737

Last Name _____ First Name _____ Middle Initial _____

Street Address _____ City _____ State _____ Zip _____

Telephone number to contact you about this position _____

Email _____ Date available for employment _____

Position you are seeking _____ May we contact you at work? [] Yes [] No

Are you legally authorized to work in the United States? [] Yes [] No

Proof of employment eligibility will be required upon hire in compliance with the laws and regulations of the United States Citizenship and Immigration Services, the Department of Homeland Security, and the Social Security Administration. OPERS is an E-Verify Employer. For more information on E-Verify, go to www.opers.ok.gov/jobs.

Are you related by blood or marriage to any current or former OPERS employee or Board Member? [] Yes [] No

If yes, name that person and your relationship to them _____

Have you ever been convicted of any offenses, other than minor traffic violations? [] Yes [] No

If yes, please explain

[Empty text box for explanation]

Your criminal history is not a bar to employment in all cases, although a false answer can be. Each criminal history is evaluated individually in relation to the position for which you have applied.

Have you ever been fired or involuntarily terminated from a job? [] Yes [] No

If yes, please explain

[Empty text box for explanation]

Check the box that best describes your experience with the following software

- Microsoft Word [] Proficient [] Some experience [] No experience
Microsoft Excel [] Proficient [] Some experience [] No experience
Microsoft PowerPoint [] Proficient [] Some experience [] No experience
Microsoft Access [] Proficient [] Some experience [] No experience

Describe any other computer experience you have.

[Empty text box for computer experience]

List any special skills you have including use of office equipment.

Education & Training

High School Name & Location _____

Diploma or GED equivalency received? Yes No

Business/Trade/Career Tech School Name & Location _____

Course of study _____ Did you graduate? Yes No Degree earned _____

College Name & Location _____

Major _____ Did you graduate? Yes No Degree earned _____

College Name & Location _____

Major _____ Did you graduate? Yes No Degree earned _____

List any professional or occupational licenses, certifications, or registrations.

Work Experience: Starting with your current or most recent position, list your work experience.

1. Present or most recent employer _____

Address _____ City _____ State _____ Zip _____

Job Title _____

Start date (month/year) _____ End date (month/year) _____

Supervisor's name _____ Supervisor's phone _____

May we contact this employer as a reference? Yes No

Description of work (text limited to box size)

of employees supervised (if any) _____ Annual salary _____ Hours worked per week _____

Reason for seeking another position _____

2. Employer _____

Address _____ City _____ State _____ Zip _____

Job Title _____

Start date (month/year) _____ End date (month/year) _____

Supervisor's name _____ Supervisor's phone _____

Description of work (text limited to box size)

of employees supervised (if any) _____ Annual salary _____ Hours worked per week _____

Reason for seeking another position _____

3. Employer _____

Address _____ City _____ State _____ Zip _____

Job Title _____

Start date (month/year) _____ End date (month/year) _____

Supervisor's name _____ Supervisor's phone _____

Description of work (text limited to box size)

of employees supervised (if any) _____ Annual salary _____ Hours worked per week _____

Reason for seeking another position _____

4. Employer _____

Address _____ City _____ State _____ Zip _____

Job Title _____

Start date (month/year) _____ End date (month/year) _____

Supervisor's name _____ Supervisor's phone _____

Description of work (text limited to box size)

of employees supervised (if any) _____ Annual salary _____ Hours worked per week _____

Reason for seeking another position _____

5. Employer _____

Address _____ City _____ State _____ Zip _____

Job Title _____

Start date (month/year) _____ End date (month/year) _____

Supervisor's name _____ Supervisor's phone _____

Description of work (text limited to box size)

of employees supervised (if any) _____ Annual salary _____ Hours worked per week _____

Reason for seeking another position _____

6. Employer _____

Address _____ City _____ State _____ Zip _____

Job Title _____

Start date (month/year) _____ End date (month/year) _____

Supervisor's name _____ Supervisor's phone _____

Description of work (text limited to box size)

of employees supervised (if any) _____ Annual salary _____ Hours worked per week _____

Reason for seeking another position _____

If you have more than six separate periods of employment, complete a blank page in the above format and attach it to your application.

How did you FIRST hear about this position?

- Oklahoman
- Human Capital Management website
- OPERS website
- Other publication or website (specify) _____
- Friend/OPERS employee (specify) _____
- Other (specify) _____



Applicant Certification

I certify that the information provided in this application and in any other form, oral or written, is true and accurate. I authorize the Oklahoma Public Employees Retirement System to verify the information I have provided in my employment application, in my oral statements, and in any other documents or supplemental information I have provided to this agency for the purposes of employment. I understand and agree that any misstated, misleading, incomplete, or false information is grounds for my disqualification from consideration for employment, for withdrawal of an offer of employment if an offer has been made, or for my immediate discharge if employment has already commenced, whenever, and however discovered. I hereby release from liability and hold harmless the Oklahoma Public Employees Retirement System and its employees, along with any organization or individual providing information to the Oklahoma Public Employees Retirement System, from any and all causes of action accrued to me as a result of such disclosure of information concerning me.

I also certify and agree that any documents submitted by me with this application or in connection with this application, including, but not limited to, resumes, applications, letters, forms, or other documents, which are prepared on my behalf by any other party or individual, are true and correct, whether signed or unsigned by me, and that any false or misleading information contained therein is my full and complete responsibility.

I understand that the position for which I am applying is unclassified. I understand that unclassified employees serve at the will of the Executive Director and that unclassified positions are not subject to most of the rights and protections of the state merit system. I understand that an unclassified employee may be terminated at any time, with or without cause.

If selected for employment, I agree to conform to the policies, rules and regulations of the Oklahoma Public Employees Retirement System. I understand that no representative of this agency, other than the Executive Director, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

Printed Name _____

Signature _____ Date _____

Title 21 of the Oklahoma Statutes, Section 358(B) and 359(B) state that it shall be unlawful for any person applying for employment with the State of Oklahoma to make a materially false, fictitious or fraudulent statement or representation on an employment application, knowing such statement or misrepresentation to be materially false, fictitious or fraudulent, and that any person found guilty of violating this provision shall be guilty of a misdemeanor punishable by a fine not exceeding One Thousand Dollars (\$1,000.00) or by imprisonment in the county jail for a term not exceeding one year, or by both fine and imprisonment.

**The Oklahoma Public Employees Retirement System is an
Equal Employment Opportunity Employer**



Authorization for Background Investigation and Release of Liability

I authorize the Oklahoma Public Employees Retirement System to verify the information I have provided in my employment application, in my oral statements, and in any other documents or supplemental information I have provided to this agency for the purposes of employment. This shall include the authorization to conduct any and all personal background checks, including, but not limited to, criminal history and related records, education and employment background and records, civilian and military court records and/or proceedings.

I certify that all information I have supplied to the Oklahoma Public Employees Retirement System in my application and in any other form, oral or written, is true and accurate. I understand and agree that any misstated, misleading, incomplete, or false information is grounds for my disqualification from consideration for employment, for withdrawal of any offer of employment if an offer has been made, or for my immediate discharge if employment has already commenced, whenever and however discovered.

I understand that it is unlawful for any person applying for employment with the State of Oklahoma to make a materially false, fictitious or fraudulent statement or representation on an employment application, knowing such statement or representation to be materially false, fictitious or fraudulent, and that any person found guilty of violating this provision shall be guilty of a misdemeanor punishable by a fine not exceeding One Thousand Dollars (\$1,000.00) or by imprisonment in the county jail for a term not exceeding one year, or by both fine and imprisonment.

I also certify and agree that any documents submitted by me with this application or in connection with this application, including, but not limited to, resumes, applications, letters, forms, or other documents, which are prepared on my behalf by another party or individual, are true and correct, whether signed or unsigned by me, and that any false or misleading information contained therein is my full and complete responsibility.

I realize that any criminal history may bar employment with the Oklahoma Public Employees Retirement System. I further understand that nothing in my application is intended to imply or create an employment relationship or contract for employment.

I hereby release from liability and hold harmless the Oklahoma Public Employees Retirement System and its employees, along with any organization or individual providing information to the Oklahoma Public Employees Retirement System from any and all causes or action accrued to me as a result of such disclosure of information concerning me.

I understand that a copy of this document shall have the same legal significance as the original.

Printed Name _____

Signature _____ Date _____



Statistical Data (optional)

The Oklahoma Public Employees Retirement System adheres to equal employment opportunity laws and guidelines set forth by state and federal law. This information is sought to assist us in complying with these laws and guidelines and to provide statistical data to appropriate state and federal agencies. It will not be used in any way to discriminate against any applicant for employment.

First Name _____ Middle Initial _____ Last Name _____

Maiden Name _____ Previous Name _____

Date of Birth _____ Gender _____ Race _____

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