



**TULSA COUNTY
DISTRICT ATTORNEY'S OFFICE
APPLICATION FOR EMPLOYMENT**

Please print or type all information.

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|---|---------------|-------------------------------|-------------------------|
| NAME: (LAST, FIRST, MIDDLE) | | E-MAIL ADDRESS | |
| | | | |
| MAILING OR STREET ADDRESS/APT #: | | PRIMARY CONTACT PHONE: | |
| | | | |
| CITY | STATE: | ZIP CODE: | ALTERNATE PHONE: |
| | | | |

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| ARE YOU AT LEAST 18 YEARS OLD? <input type="checkbox"/> YES <input type="checkbox"/> NO | ARE YOU ELIGIBLE TO WORK IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO |
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| HAVE YOU EVER BEEN EMPLOYED BY THE STATE OF OKLAHOMA? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF YES, LIST AGENCY NAME AND DATES OF EMPLOYMENT: |
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| HAVE YOU EVER BEEN EMPLOYED BY TULSA COUNTY? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF YES, LIST AGENCY NAME AND DATES OF EMPLOYMENT: |
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| IF PREVIOUSLY EMPLOYED BY THE D.A.'S OFFICE, LIST NAME(S) USED ON PAST RECORDS: | |
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| DO YOU HAVE RELATIVES CURRENTLY EMPLOYED BY THE TULSA CO. D.A.'S OFFICE? IF SO, LIST NAME, RELATIONSHIP AND DIVISION: | |
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| POSITION INFORMATION & AVAILABILITY: | |
| DATE AVAILABLE: | POSITION DESIRED: |
| SALARY EXPECTED: | SALARY NEGOTIABLE: <input type="checkbox"/> YES <input type="checkbox"/> NO |
| TYPE OF EMPLOYMENT DESIRED: <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> TEMPORARY INTERNSHIP | |
| WOULD YOU CONSIDER A POSITION OTHER THAN THE ONE FOR WHICH YOU ARE APPLYING? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| HOW WERE YOU REFERRED? <input type="checkbox"/> NEWSPAPER <input type="checkbox"/> WALK-IN <input type="checkbox"/> DA EMPLOYEE <input type="checkbox"/> WEBSITE <input type="checkbox"/> OTHER: | |

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| IF APPLYING FOR AN ATTORNEY OR INTERN POSITION, PLEASE PROVIDE THE FOLLOWING INFORMATION: | |
| DATE OF LEGAL INTERN LICENSE: | DATE ADMITTED TO THE OKLAHOMA BAR: |

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| HAVE YOU EVER BEEN CONVICTED OF ANY OFFENSES OTHER THAN MINOR TRAFFIC VIOLATIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE EXPLAIN: |
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EMPLOYMENT HISTORY – PLEASE COMPLETE IN FULL LISTING LAST EMPLOYER FIRST (even if attaching a resume)

| 1. Employer's Name & Address | Position Title | From (Month/Year) | To (Month/Year) |
|------------------------------|------------------------|-------------------|---|
| Duties: Please be specific. | | | |
| Supervisor's Name & Title | Average Hours Per Week | Ending Salary | May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Reason for Leaving: | | | |

| 2. Employer's Name & Address | Position Title | From (Month/Year) | To (Month/Year) |
|------------------------------|------------------------|-------------------|---|
| Duties: Please be specific. | | | |
| Supervisor's Name & Title | Average Hours Per Week | Ending Salary | May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Reason for Leaving: | | | |

| 3. Employer's Name & Address | Position Title | From (Month/Year) | To (Month/Year) |
|------------------------------|------------------------|-------------------|---|
| Duties: Please be specific. | | | |
| Supervisor's Name & Title | Average Hours Per Week | Ending Salary | May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Reason for Leaving: | | | |

| 4. Employer's Name & Address | Position Title | From (Month/Year) | To (Month/Year) |
|------------------------------|------------------------|-------------------|---|
| Duties: Please be specific. | | | |
| Supervisor's Name & Title | Average Hours Per Week | Ending Salary | May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Reason for Leaving: | | | |

EMPLOYMENT HISTORY – CONTINUED

| 5. Employer's Name & Address | Position Title | From (Month/Year) | To (Month/Year) |
|------------------------------|------------------------|-------------------|---|
| Duties: Please be specific. | | | |
| Supervisor's Name & Title | Average Hours Per Week | Ending Salary | May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Reason for Leaving: | | | |

| 6. Employer's Name & Address | Position Title | From (Month/Year) | To (Month/Year) |
|------------------------------|------------------------|-------------------|---|
| Duties: Please be specific. | | | |
| Supervisor's Name & Title | Average Hours Per Week | Ending Salary | May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Reason for Leaving: | | | |

EDUCATION – You may be asked to submit a transcript and/or diploma.

| HIGH SCHOOL: Name & City/State | AREA OF STUDY | TYPE OF DIPLOMA | COMPLETED | DATES ATTENDED | DATE DEGREE RECEIVED |
|--------------------------------|-----------------|--|---|----------------|----------------------|
| | STANDARD | <input type="checkbox"/> DIPLOMA <input type="checkbox"/> GED | <input type="checkbox"/> YES <input type="checkbox"/> NO | N/A | N/A |
| COLLEGE: Name & City/State | MAJOR/MINOR | TYPE OF DEGREE | COMPLETED | DATES ATTENDED | DATE DEGREE RECEIVED |
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| COLLEGE: Name & City/State | MAJOR/MINOR | TYPE OF DEGREE | COMPLETED | DATES ATTENDED | DATE DEGREE RECEIVED |
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| COLLEGE: Name & City/State | MAJOR/MINOR | TYPE OF DEGREE | COMPLETED | DATES ATTENDED | DATE DEGREE RECEIVED |
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| OTHER: Name & City/State | AREA OF STUDY | TYPE OF DEGREE | COMPLETED | DATES ATTENDED | DATE DEGREE RECEIVED |
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | |

| LICENSES/CERTIFICATES HELD | ISSUED BY: | EXPIRATION DATE: (MO/DAY/YEAR) |
|----------------------------|------------|--------------------------------|
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SKILLS INVENTORY: Please check each of the following skills that you possess.

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| <p>GENERAL SKILLS</p> <p><input type="checkbox"/> Supervisory Indicate length of time ____ No. persons supervised ____</p> <p><input type="checkbox"/> Others: (Please list)</p> <p>BUSINESS MACHINES</p> <p><input type="checkbox"/> Typing – Speed _____wpm <input type="checkbox"/> Shorthand _____wpm <input type="checkbox"/> Dictaphone <input type="checkbox"/> Multi-Line Phone <input type="checkbox"/> Ten Key Calculator <input type="checkbox"/> Switchboard <input type="checkbox"/> Fax <input type="checkbox"/> Voice Mail <input type="checkbox"/> Photo Copier <input type="checkbox"/> Overhead Projector <input type="checkbox"/> Others: (Please list)</p> | <p>CLERICAL SKILLS</p> <p><input type="checkbox"/> Accounting/Bookkeeping <input type="checkbox"/> Data Entry <input type="checkbox"/> Editing <input type="checkbox"/> Filing <input type="checkbox"/> Receptionist <input type="checkbox"/> Shorthand <input type="checkbox"/> Others: (Please list)</p> <p>COMPUTER PROFICIENCY</p> <p><input type="checkbox"/> PC <input type="checkbox"/> Macintosh <input type="checkbox"/> Microsoft Word <input type="checkbox"/> Microsoft Excel <input type="checkbox"/> Microsoft Access <input type="checkbox"/> Power Point <input type="checkbox"/> Databases <input type="checkbox"/> Email <input type="checkbox"/> Justware <input type="checkbox"/> Desktop Publishing <input type="checkbox"/> Windows <input type="checkbox"/> Others: (Please list)</p> |
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**The Tulsa County District Attorney is an Equal Opportunity Employer
(Applicant signature required before application will be processed)**

I certify that the information provided herein is true and complete to the best of my knowledge and belief, and that it does not misrepresent my history or qualifications.

I authorize the Tulsa County District Attorney's Office to make such investigations and inquiries of my references to provide information concerning my previous employment. I waive my right to privacy to the extent required to verify relevant background and ability to perform all job-related functions. My consent includes, but is not limited to: my prior job function, work performance, education, criminal record and other permissible job-related issues.

I understand that willful falsification or misrepresentation constitutes grounds for denying employment or for dismissal there from.

If hired by the Tulsa County District Attorney's Office, I agree to comply with its employment policies, rules and regulations. I agree to accept the work and will perform the duties assigned while acknowledging that changes in my assignment may be made in the best interest of the Office.

The Tulsa County District Attorney is an employer at will. If I am employed by the District Attorney's Office I acknowledge that there is no guaranteed length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the Office or I can terminate the relationship at will, with or without cause, so long as there is no violation of applicable federal and state laws.

I understand that Oklahoma State Office of Personnel Management rules require employees hired after December 1, 2004 to participate in the State's system for the direct deposit of paychecks.

I understand that upon employment I will be required to provide a social security number and card, and will have to show proof of eligibility to work in the United States. Failure to submit proof within the required time will result in immediate termination of employment.

PLEASE ATTACH A RESUME TO THIS APPLICATION

Applicant's Signature (read above statement before signing)

Date