Sheriff's Office

JOE HARPER

TO WHOM IT MAY CONCERN:

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I,records concerning myself to a the said records are of public,	any duly authorized agent of t	the Payne County	and full disclosure of all Sheriff's Office, whether
records of educational institution and other financial statement employment and pre-employment and pre-employment or grievances filed or of other counsel, whether rewhich I presently have or have	nts and records, whereve yment records, including by or against me and the rec epresenting me or another pe	es, (including credit r filed; U.S. Veto background repo cords and recollect	t reports and/or ratings); eran's Administrations, rts, efficiency ratings, ions of attorneys at law,
I understand that any which is developed directly or considered in determining my certify that any person(s) whaccountable for giving this inforwhich may be incurred as a result.	suitability for em <mark>plo</mark> yment by no may furnish such inform rmation, and I do hereby rele	ort, upon this relea the Payne Countynation concerning ase said person(s)	se authorization will be y Sheriff's Office. I also me shall not be held
A photocopy of this re	elease form will be valid as	an original thereof	even though the said
photocopy does not contain an			, even though the said
priotocopy decoration		3/11/2	
	PERSONAL INFORMA	TION	S IZA
NAME (LAST, FIRST MIDDL		RACE (WIBA)	DATE OF BIRTH
	The state of the s		
ADDRESS	CITY / STATE / ZIP COD	E	HOME PHONE
	A B RO		
DRIVER'S LICENSE NUMBER / STATE	SOCIAL SECURITY NUMBER	M	AIDEN NAME(S)
		E	
	SIGNATURE	5/0	

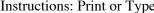


Application for Employment

Payne County Sheriff's Office



606 South Husband, Suite 106 Stillwater Oklahoma 74074



(405) 372-4522 Instructions: Print or Type Please answer all questions. Application must be completely filled out to be considered. Application will be retained

one year during wh	ich time you may upone County is an equa	date it. Candidates v	whose qualification	s best meet the needs	s of the County will
Are you a citizen, law authorized to work in	ful permanent resident the United States?	or otherwise	les N	[o	
Legal Name				Date	
Address				Zip Code	
City	\$	State	E-Mail		
Home Phone	,	Work Phone		Mobile Phone	
Are you 18 or Older?	Yes	No Soc	cial Security Numb	er	
Position Desired	I	Desired Salary		Date Available For W	ork
Have You Ever Work	ed for Payne County?	If yes when?		Department?	
Who referred you to F	Payne County?				
Do you have any relat currently work for Pay	me County?	o If yes, who? es Department?			
Education	Name and Location of School	Number of Years Completed	Degree Received	Year	Major Courses of Study
Note: with your appli	cation please attach a	transcript of your high	school diploma and	a copy of your drivers	license.
I have conved in the	ao II C Military - D	(D)			
I have served in the Duties Performed	ic o.s. wilitary Dat	es of Duty			

SKILLS – Please	indicate training or	experience	
Professional or tr			
Typing (WPM)	CLEET	#	OLETS #
Word Process	ing		
Computer Op	erations OTHER		
☐ I have a valid	Oklahoma Driver's	License. Type	Operator License #
Endorsements		31	-1
What job (or activity) have you most enjoyed? Why?			Yes Have you ever been discharged or asked to resign from employment? If yes, please give particulars on a separate sheet. Yes Have you ever been found guilty of a felony?
3 3 3			No Date Offense
			Place (City and State)
What job (or activity) have			If yes, please give particulars on a separate sheet.
you least enjoyed? Why?			Yes Have you ever been refused a If yes, for what position?
Work Experience			You may contact my present employer.
Start with present or	last employment and	work back through previo	us positions.
Name of Employe	r:		
Name of last super	visor:		
Dates of employmen	t: From:	To:	Salary: From: To:
Address:			
Phone #:		Last job title:	
Reason for Leaving	(be specific):		
Duties performed wh	ile you worked at this	company:	
Name of Employer	:		
Name of last super	visor:		
Dates of employment	: From:	То:	Salary: From: To:
Address:	<u> </u>		
Phone #:		Last job title:	
Reason for Leaving (be specific):		
List the jobs you held	, duties performed, ski	lls used or learned, advan	cements, or promotions while you worked at this company:

Name	Address	Phone	Relationship
	<u>, </u>		
Residences for past 5 years			
Location	Rent/Own	Mortgage Company	Landlord Name & Number
Any material misrepresentation termination from employment It is my understanding that Papresent and previous employe I agree that my employment in the time of such termination. Business needs may at times rethrough Friday.	on or deliberate omission of a fact in my t. lyne County may make a thorough inverse and educational institutions to providinal between the terminated by Payne County at a make the following conditions mandato	y application may be justification for refusal stigation and may verify all data given in the de information requested to Payne County. any time without liability for wages or salar ry: overtime, shift work, a rotation of sched	is application. I herby authorize my y except such as may have been earned at lule, or a work schedule other than Monda
Any material misrepresentation termination from employment It is my understanding that Papresent and previous employer I agree that my employment in the time of such termination. Business needs may at times in through Friday. Payne County reserves the rig process. Is an application for employment. Enter and that Payne County can change ployed, I will comply with all rules going this I am acknowledging that	on or deliberate omission of a fact in my t. lyne County may make a thorough inverse and educational institutions to providing be terminated by Payne County at a make the following conditions mandato that to request a post-employment physic employment is not being offered at this the wages, benefits, and conditions at any and regulations as set forth in the Payne	stigation and may verify all data given in the information requested to Payne County. any time without liability for wages or salar ry: overtime, shift work, a rotation of schedular examination and comprehensive drug testime. I understand that if I am employed, s	y except such as may have been earned at dule, or a work schedule other than Monda sting as a normal part of the selection such employment is for an indefinite perioded by departmental procedures.
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