

## Northern Oklahoma College

Application for Employment **Return to: Human Resources Office**P.O. Box 310, Tonkawa, OK 74653

Position applying for:			□ Tonkawa □ Enid □ Stillwater □ Other					
			□ Full-Time □ Part-Time □ Temporary					
Personal Information								
Last Name	First Name			Middle				
Address	City, State, Zip							
Contact Phone	Email address							
Are you willing to take a drug test?   Yes  No  Are you legally authorized to work in the United States?   Documentation of your identity and employment eligibility must be provided upon hire as required by the Immigration Reform and Control Act of 1986.								
Do you have any relatives employed at NOC?								
Education  High School Diploma/G.E.D: □ Yes □ No If no, indicate highest grade completed:								
Names of colleges or universities attended (list most recent education first)	Dates Attended	Major	Minor	Degree or Certificates Earned				
Where did you hear of this opening? □Newspape	er □Website □O	ther: list	l l					
Skills and Certifications								
List all valid professional licenses you hold; include the certification number and the date of expiration.								
Indicate other employment skills, special training or related courses that you would like considered as part of your application.								
Describe significant contributions and achievement considered as part of your application.	s, including public	ations or awa	rds, in professi	onal and/or civic activities that you would like				

Please click on the link to view Northern Oklahoma College's Annual Security and Fire Reports.

## **Employment Experience**

Please list all prior employment beginning with current or most recent employment first.

May we contact your present employer? Yes	No Superviso						
Employer		Immediate Supervisor			Title		
Employer's Address		City, State, Zip			Phone and/or email		
Position Held	Date of Employme	e of Employment		Reason for Leaving			
Employer		Immediate Supervisor			Title		
Employer's Address		City, State, Zip			Phone and/or email		
Position Held	Date of Employme	Reason		Reason for Le	ı for Leaving		
Employer		Immediate Superviso			Title		
Employer's Address		City, State, Zip			Phone and/or email		
Position Held	Date of Employme	 ment F		Reason for Leaving			
Professional References							
First and Last Name		Email addr	ess				
Address	City, State, 2	Zip		Phone number			
First and Last Name		Email address					
ddress		City, State, 2	Zip		Phone number		
First and Last Name		Email address					
Address	City, State, 2	I ate, Zip		Phone number			
First and Last Name		Email address					
Address		City, State, 2	_		Phone number		
First and Last Name		Email address		1			
Address	City, State, 2	y, State, Zip		Phone number			
I hereby understand that all information provided on this application is true and accurate, and understand that a background search will be processed for every NOC employee prior to the finalization of their employment.							
Signature of Applicant	_						

## **Notice of Nondiscrimination**

Northern Oklahoma College does not discriminate on the basis of race, color, national origin, sex/gender, age or disability in admission to its programs, services or activities, in access to them, in treatment of individuals or in any aspect of their operations. Northern Oklahoma College also does not discriminate in its hiring or employment practices. This notice is provided as required by Title VI of the Civil Rights Act of 1964, Section 594 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975 and the Americans with Disabilities Act of 1990, Questions, complaints or requests for additional information regarding these laws may be forwarded to the designated compliance coordinator, Jason Johnson, Vice President for Student Affairs, 1220 East Grand Avenue, PO Box 310, Tonkawa, OK 74653-0310; telephone 580-628-6240 8 a.m. to 5 p.m. Monday through Friday.