



There will be no discrimination in the technology center because of race, color, sex, pregnancy, gender, gender expression or identity, national origin, religion, disability, veteran status, sexual orientation, age, or genetic information in its programs, services, activities, and employment. The district also provides equal access to the Boy Scouts of America and other designated youth groups. The following people have been designated to handle inquiries regarding the technology center's nondiscrimination policy (including 504, ADA, Title IX): Assistant Superintendent, Instruction and the Executive Director, Human Resources. Inquiries concerning application of this policy or to file a complaint may be made by calling 405.801.5000, emailing [compliance.officer@mntc.edu](mailto:compliance.officer@mntc.edu) or by visiting the Franklin Road Campus at 4701 12th Avenue NW, Norman, Oklahoma 73069. Visit [www.mntc.edu/consumerinfo](http://www.mntc.edu/consumerinfo) for details.

Please Print

Date \_\_\_\_\_

**Application Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Home: \_\_\_\_\_ Work: \_\_\_\_\_ ext.: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Do you have a valid driver's license?  Yes  No

Have you ever worked for us before?  Yes  No If yes, when? \_\_\_\_\_

If you have friends or relatives working for us, state their name and relationship. \_\_\_\_\_

How did you learn about this opening?  Friend  Website  Newspaper  Other: \_\_\_\_\_

State briefly why you would like to work for Moore Norman Technology Center: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No

**General Information about Employment Desired**

Position you are applying for: \_\_\_\_\_

Full-time or  Part-time If Part-time, hours per week desired? \_\_\_\_\_

Days of week you are available to work:  Sun  Mon  Tues  Wed  Thurs  Fri  Sat

Hours available: \_\_\_\_\_ If hired, what date could you start work? \_\_\_\_\_

Hourly rate of pay or monthly salary desired? \_\_\_\_\_

## Employment History

List the last 10 years of your previous employers starting with your present or most recent position below.

Company: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_

Address (Street/City/State/Zip): \_\_\_\_\_

Area Code & Phone Number: \_\_\_\_\_ May we contact employer?  Yes  No

Position: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

Duties: \_\_\_\_\_

Starting Rate of Pay: \_\_\_\_\_ Ending Rate of Pay: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_

Address (Street/City/State/Zip): \_\_\_\_\_

Area Code & Phone Number: \_\_\_\_\_ May we contact employer?  Yes  No

Position: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

Duties: \_\_\_\_\_

Starting Rate of Pay: \_\_\_\_\_ Ending Rate of Pay: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_

Address (Street/City/State/Zip): \_\_\_\_\_

Area Code & Phone Number: \_\_\_\_\_ May we contact employer?  Yes  No

Position: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

Duties: \_\_\_\_\_

Starting Rate of Pay: \_\_\_\_\_ Ending Rate of Pay: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_

Address (Street/City/State/Zip): \_\_\_\_\_

Area Code & Phone Number: \_\_\_\_\_ May we contact employer?  Yes  No

Position: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

Duties: \_\_\_\_\_

Starting Rate of Pay: \_\_\_\_\_ Ending Rate of Pay: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_  
 Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
 Address (Street/City/State/Zip): \_\_\_\_\_  
 Area Code & Phone Number: \_\_\_\_\_ May we contact employer?  Yes  No  
 Position: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_  
 Duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Starting Rate of Pay: \_\_\_\_\_ Ending Rate of Pay: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_  
 Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
 Address (Street/City/State/Zip): \_\_\_\_\_  
 Area Code & Phone Number: \_\_\_\_\_ May we contact employer?  Yes  No  
 Position: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_  
 Duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Starting Rate of Pay: \_\_\_\_\_ Ending Rate of Pay: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

**Education and Training**  
 (Include On-the-Job Training)

|                    | School/Location | Course of Study & Degree | Dates Attended |
|--------------------|-----------------|--------------------------|----------------|
| High School        |                 |                          |                |
| Community College  |                 |                          |                |
| Vocational School  |                 |                          |                |
| College/University |                 |                          |                |
| Seminars/Other     |                 |                          |                |
|                    |                 |                          |                |

**Special Skills**

Do you have other experience, training, qualifications, or skills which you feel make you especially suited for work at Moore Norman Technology Center? If so, explain in detail below (Include Professional Organizations & Certificates/Licenses with States):

\_\_\_\_\_  
 \_\_\_\_\_

| Computer Skills (Hardware/Software) | Dates Used | Level of Proficiency |
|-------------------------------------|------------|----------------------|
|                                     |            |                      |
|                                     |            |                      |
|                                     |            |                      |

Use the space below to summarize other relevant experience, skills, and background.

\_\_\_\_\_  
 \_\_\_\_\_

## Professional References

|                |                  |
|----------------|------------------|
| Name: _____    | Position: _____  |
| Company: _____ | Telephone: _____ |
| Name: _____    | Position: _____  |
| Company: _____ | Telephone: _____ |
| Name: _____    | Position: _____  |
| Company: _____ | Telephone: _____ |
| Name: _____    | Position: _____  |
| Company: _____ | Telephone: _____ |
| Name: _____    | Position: _____  |
| Company: _____ | Telephone: _____ |
| Name: _____    | Position: _____  |
| Company: _____ | Telephone: _____ |

Please read and initial each paragraph below.

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ I hereby authorize Moore Norman Technology Center to thoroughly investigate my references, work records, education, and other matters related to my suitability for employment and further authorize my current and former employers to disclose to the company any and all letters, reports, and other information pertaining to my employment with them, without giving me prior notice or such disclosure. In addition, I hereby release Moore Norman Technology Center, my current and former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_ I understand that if offered employment, the offer is contingent on me passing a pre-employment drug screen and a pre-employment physical, if required. By signing this application, I voluntarily agree to submit to a pre-employment drug screening and pre-employment physical upon receipt of a verbal offer of employment. I understand that failure to pass the drug screen or to meet the physical requirements of the job will result in withdrawal of the employment offer.

\_\_\_\_\_ I understand that nothing contained in the application or conveyed to me during any interview which may be granted is intended to create an employment contract, implied or explicit, between Moore Norman Technology Center and me.

\_\_\_\_\_ I have reviewed the essential job functions on the job description and am able to do them with or without reasonable accommodation.

\_\_\_\_\_ I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States on or before my first day of employment.

\_\_\_\_\_ If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid Oklahoma driver's license and that I may be required to provide a copy of my official driving record and proof of insurance. I also understand that any offer of employment is contingent on my ability to be covered by Moore Norman Technology Center auto insurance, if required for my position.

My signature below certifies that I have read and understand this complete application and agree to the terms and conditions outlined in the document.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date