



# Employment Application

**Grady County Fairgrounds**

**500 East Choctaw**

**Chickasha, OK 73018**

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Permanent Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Telephone Number: \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell)

Have you ever been employed with Grady County? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, give dates and position: \_\_\_\_\_

On what date would you be available for employment? \_\_\_\_\_

Do you have a relative who is currently serving on the Grady County Fairboard? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please explain: \_\_\_\_\_

An I-9 is required of all employees to determine eligibility to work in the United States. In addition, if you are under 18 years of age, can you provide proof of your eligibility to work? \_\_\_\_\_ Yes \_\_\_\_\_ No

(Verification will be required and failure to furnish documentation will be cause for separation)

Do you have the ability to perform the job related functions of the job applied for? \_\_\_\_\_ Yes \_\_\_\_\_ No

If the answer to the above question is no, please describe what reasonable accommodations would enable you to perform the job related functions of the job applied for: \_\_\_\_\_

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

Do you hold a current and valid Oklahoma Driver's License? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, give type, expiration date and number: Type: \_\_\_ D, \_\_\_ C, \_\_\_ B, or \_\_\_ A

Endorsements: \_\_\_\_\_

License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Have you been convicted of a felony/misdemeanor in the last 5 years? \_\_\_\_\_ Yes \_\_\_\_\_ No

(If yes, please explain: Note: this information does not in itself disqualify you from employment) \_\_\_\_\_

\_\_\_\_\_

Education: High School: \_\_\_\_\_  
 (Name) (Grade Completed) (Year Completed)  
 College: \_\_\_\_\_  
 (Name) (Grade Completed) (Year Completed)  
 Other: \_\_\_\_\_  
 (Name) (Grade Completed) (Year Completed)

Employment History: Please list a complete record of your experience:

Name: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Duties: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
 May We Contact: \_\_\_\_\_ Yes \_\_\_\_\_ No Telephone Number: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

Name: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Duties: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
 May We Contact: \_\_\_\_\_ Yes \_\_\_\_\_ No Telephone Number: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

Name: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Duties: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_  
 May We Contact: \_\_\_\_\_ Yes \_\_\_\_\_ No Telephone Number: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

References: (List three persons not related to you, whom you have known at least one year)

_____ (Name)	_____ (Address)	_____ (Occupation)	_____ (Telephone Number)
_____ (Name)	_____ (Address)	_____ (Occupation)	_____ (Telephone Number)
_____ (Name)	_____ (Address)	_____ (Occupation)	_____ (Telephone Number)

Notice to Applicant: I understand that as this County deems necessary, I may be required to work overtime hours or hours outside a normally defined work day or work week. If employed, I understand and agree that such employment may be terminated at any time for any reason not prohibited by law and without any liability to me for any continuation of salary, wages, or employment related benefits (not required by law).

Please Note: Completion of this application DOES NOT GUARANTEE ANY INTERVIEW OR EMPLOYMENT with Grady County. Your application will be placed in an active file for one (1) year from the date completed. We will need to be notified of any changes on the application throughout the year.

I certify to the best of my knowledge the facts set forth in my application are accurate and complete.

\_\_\_\_\_ Legal Signature of Applicant