



Application for Employment

Baptist Children's Home – Oklahoma City Campus
 Baptist Children's Home – Owasso Campus
 Baptist Home for Girls – Madill Campus
 Boys Ranch Town – Edmond Campus
 Hope Pregnancy Center-North – Oklahoma City
 Hope Pregnancy Center-South-Oklahoma City
 Hope Pregnancy Center Edmond
 Hope Pregnancy Center – Tulsa Metro
 Hope Pregnancy Center – Ardmore
 Hope Pregnancy Center – Shawnee
 Hope Pregnancy Center – NW Oklahoma (Alva)
 Home Office – Oklahoma City

Please Print

Date: _____

Personal Information

| | | |
|----------------|--------------------|------------------------|
| (Last) | (First) | (Middle) |
| Name: | | |
| (Street) | (Apartment Number) | Home Telephone Number: |
| Address: | | () |
| (City) | (State) | (Zip) |
| Email Address: | | Cell Telephone Number: |
| | | () |

Position Applied For: _____ Location: _____
 (Applicant must specify the particular position and location.)

Would you consider a position elsewhere, and if so, which locations? Yes No

Alva Ardmore Madill Oklahoma City Owasso Edmond Shawnee Tulsa

How did you hear about this position? Current OBHC Employee Website/Online Ad Other

Please provide OBHC Employee name/website/other: _____

Are you legally eligible for employment in the United States? Yes No
 (Proof of United States citizenship or immigrant status will be required upon employment.)

Are you at least 21 years of age? Yes No
 (This is applicable when applying for a position allowing unsupervised access to children.)

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?
 Yes No

If yes, give nature of offense, name and location of court and the penalty or disposition of the case or cases: _____

Do you drink alcoholic beverages? Yes No

Do you use tobacco products? Yes No

Do you use marijuana products? Yes No

Do you have a current driver's license? Yes No License Number _____ State: _____
 (This is applicable when applying for a position that driving is a part of the position's responsibilities.)

Have you been convicted of a traffic offense in the past five (5) years? Yes No

If yes, give the nature of the offense, the name and location of the court and the penalty or disposition of the case:

(A prior conviction is not an automatic restriction to employment; however, a poor driving record may affect employment eligibility with OBHC when driving is a part of the position's responsibilities.)

Marital Status: Single Engaged Married

Date of Marriage: _____

When applying for a house parent position: List the names and ages of your children and whether they are living with you.

| Name | Age | Currently Living with You |
|------|-----|---------------------------|
| | | |
| | | |
| | | |
| | | |

EDUCATION

| | School Name | Location | Number of Years Attended | Field Of Study/Major | Degree Earned |
|--------------------|-------------|----------|--------------------------|----------------------|---------------|
| High School | | | | | |
| College | | | | | |
| Graduate | | | | | |
| Vo-Tech | | | | | |
| Other | | | | | |

Additional job-related seminars, short courses, workshops, or other educational experiences, if any:

Additional job-related special training, specialized licensing, special skills, or noteworthy achievements, if any:

Computer Skills

Levels of Competency

| | Basic Knowledge | Working Knowledge | Professional Expertise |
|--------------------|--------------------------------|---------------------------------------|---|
| Computer Operation | <input type="checkbox"/> Basic | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced Level |
| Microsoft Word | <input type="checkbox"/> Basic | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced Level |
| Excel | <input type="checkbox"/> Basic | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced Level |
| Power Point | <input type="checkbox"/> Basic | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced Level |
| Access | <input type="checkbox"/> Basic | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced Level |
| Outlook | <input type="checkbox"/> Basic | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced Level |
| Photoshop | <input type="checkbox"/> Basic | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced Level |

Other Computer Programs: _____

CHURCH HISTORY

Are you a Christian? Yes No Where is your church membership? _____

What church responsibilities have you had? _____

At this time, in what way are you involved in your church activities? _____

Pastor's name and address: _____ Telephone No.: _____

What other pastor could recommend you? _____ Telephone

No.: _____

Please list previous churches attended:

| Church Name | Address | Telephone Number | Attended From: | Attended To: |
|-------------|---------|------------------|----------------|--------------|
| | | | | |
| | | | | |
| | | | | |

REFERENCES

(Omit names of relatives or pastors listed above)

| Name | Occupation | Complete Address | Telephone Number | Email |
|-----------------|------------|------------------|------------------|-------|
| | | | | |
| | | | | |
| | | | | |
| Work reference: | | | | |
| Work reference: | | | | |

EMPLOYMENT RECORD

(Please give accurate, complete full-time and part-time employment history, including any military service. Please use a separate sheet if additional space is required. Start with your present or most recent employer.)

Permission to contact current employer Yes No

Current Employer: _____ Phone Number: _____

Address: _____ Zip Code _____

Job Title(s): _____ Immediate Supervisor: _____

Description of your work: _____

Reason for leaving: _____

Employed from ____/____/____ to ____/____/____ Salary: Starting _____ Final _____

Employer: _____ Phone Number: _____

Address: _____ Zip Code _____

Job Title(s): _____ Immediate Supervisor: _____

Description of your work: _____

Reason for leaving: _____

Employed from ____/____/____ to ____/____/____ Salary: Starting _____ Final _____

Employer: _____ Phone Number: _____

Address: _____ Zip Code _____

Job Title(s): _____ Immediate Supervisor: _____

Description of your work: _____

Reason for leaving: _____

Employed from ____/____/____ to ____/____/____ Salary: Starting _____ Final _____

(Employment Record Continued)

Employer: _____ Phone Number: _____

Address: _____ Zip Code _____

Job Title(s): _____ Immediate Supervisor: _____

Description of your work: _____

Reason for leaving: _____

Employed from ____/____/____ to ____/____/____ Salary: Starting _____ Final _____

Employer: _____ Phone Number: _____

Address: _____ Zip Code _____

Job Title(s): _____ Immediate Supervisor: _____

Description of your work: _____

Reason for leaving: _____

Employed from ____/____/____ to ____/____/____ Salary: Starting _____ Final _____

Employer: _____ Phone Number: _____

Address: _____ Zip Code _____

Job Title(s): _____ Immediate Supervisor: _____

Description of your work: _____

Reason for leaving: _____

Employed from ____/____/____ to ____/____/____ Salary: Starting _____ Final _____

Have you ever worked under a different name for any of these employers? Yes No

If yes, please identify the employer and state the different name: _____

Have you been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? Yes No

If yes, give the nature of the offense, the name and location of the court and the penalty or disposition of the case(s) and name of probation officer if you are now on probation. _____

(A prior conviction may not be a restriction to employment.)

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed by Oklahoma Baptist Homes for Children, Inc. ("OBHC"), my employment may be terminated at any time.

In consideration of my employment, I agree to follow OBHC's rules and regulations and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or OBHC's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by OBHC. **IF I AM EMPLOYED BY OBHC. I UNDERSTAND THAT MY EMPLOYMENT WILL BE ON AN AT-WILL BASIS.**

_____ **Date**

_____ **Signature**

PLEASE READ CAREFULLY BEFORE SIGNING

DRUG TESTING

I, _____, understand that I shall be required to submit to a screening for alcohol, drugs, or other controlled substances in connection with my application for employment. I hereby consent for Oklahoma Baptist Homes for Children, Inc., a Collection Facility, and a Reference Laboratory to perform appropriate tests or examinations for the presence of alcohol, drugs, or other chemical substances. Further, I give consent for the release of the test results, or other medical information to authorized management of Oklahoma Baptist Homes for Children, Inc. for appropriate review. I understand that if I refuse to consent, the offer of employment will be withdrawn. I also understand that a confirmed test will result in the withdrawal of the offer of employment. I release Oklahoma Baptist Homes for Children, Inc., its employees, management and its designated medical or professional representatives, from any and all claims or causes of action resulting from this test, the release of the results of the test to such persons, and any decisions resulting there from. My consent to release the test results shall be valid for a period of one year from the date written below.

_____ **Date**

_____ **Signature**

_____ **Date**

_____ **Witness**

PLEASE READ CAREFULLY BEFORE SIGNING:

CONSENT AND RELEASE AGREEMENT FROM OBHC

In further consideration of my employment and pursuant to 40 Okla. Stat. §61, I authorize and consent to OBHC's disclosure to future prospective employers any employment-related information that OBHC, in its sole discretion and judgment, may determine is appropriate to disclose, including any personal comments, evaluations, or assessments that OBHC may have about my performance or behavior as an employee. I further release and hold harmless OBHC from any and all liability that may potentially result from the release and/or use of such employment-related information to future prospective employers. This release includes, but is not limited to, claims of defamation, libel, slander, negligence, or interference with contract or profession.

I understand that no representative of OBHC has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

This _____ day of _____, 20_____.

Signature

Witness

PLEASE READ CAREFULLY BEFORE SIGNING

CONSENT AND RELEASE AGREEMENT TO OBHC

I authorize Oklahoma Baptist Homes for Children, Inc. ("OBHC") and any representative of employee of that organization to make any inquiry or engage in any discussion concerning me which OBHC or its representatives and employees deem appropriate. I authorize OBHC to obtain information from any source concerning me, my history and references to the full extent that OBHC, in its discretion, deems necessary to determine my suitability for employment. I release OBHC from any and all liability that may potentially result from the use of such employment-related information from any source.

I authorize and request any former employers, schools, and persons to freely give OBHC any and all information which they may have concerning me or my previous employment, and I waive any rights which may exist with respect to such information. I authorize the release of information about me without liability to any person, firm or company releasing such information. I further release and hold harmless any former employer, school and person providing employment related information from any and all liability that may potentially result from the release of such information. This release includes, but is not limited to, claims of defamation, libel, slander, negligence, or interference with contract or profession.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE HAD THE OPPORTUNITY TO READ THIS DOCUMENT AND ASK ANY QUESTIONS I MAY HAVE HAD BEFORE SIGNING IT. I ALSO ACKNOWLEDGE THAT I UNDERSTAND THE MEANING AND EFFECT OF THIS DOCUMENT AND ITS PROVISIONS.

Authorized Signature of Applicant _____

Date _____