PHASES FOR EMPLOYMENT

PHASE ONE: APPLICATION AND QUESTIONNAIRE

PHASE TWO: WRITTEN EXAMINATION

PHASE THREE: PHYSICAL AGILITY TESTING

PHASE FOUR: ORAL BOARD

PHASE FIVE: MMPI TESTING AND BACKGROUND EXAMINATION

PHASE SIX: INTERVIEW WITH THE CHIEF OF POLICE AND/OR DESIGNEE

PHASE SEVEN: STATE PHYSICAL EXAMINATION

FAILURE TO PASS A PHASE WILL RESULT IN THE DISQUALIFICATION OF AN APPLICANT.
RELEASE AND WAIVER OF LIABILITY STATEMENT
THIS IS AN IMPORTANT LEGAL DOCUMENT
READ IT CAREFULLY BEFORE SIGNING.

The undersigned, ________________________________, wishes to release and waive all Legal, Emotional and Professional responsibility from the CITY OF ANADARKO and the Anadarko Police Department. The undersigned is a Police applicant and is volunteering for the agility test phase of the application process. The applicant therefore relieves the CITY OF ANADARKO and Anadarko Police Department from all and any responsibility that results in injury and/or emotional injury from the testing phases.

In case of emergency, contract: ____________________________________________

Name
Address
Phone

I am fully aware that by signing this document, I am releasing the CITY OF ANADARKO, Anadarko Police Department, and their employees of any and all responsibility upon my voluntary act to participate in this test.

____________________________________________
Signature

____________________________________________
Date

____________________________________________
Print Name

On the ___________day of ________________, 20____, before me personally appeared _____________________________________, the party that executed the foregoing instrument, and acknowledged the said instrument to be free and voluntary act and deed for the use and purpose therein.

Witness my hand and the official seal affixed the day and year first above written.

____________________________________________
Notary Public

Commission #
Expire Date

State of _____________________ County of _____________
ANADARKO POLICE DEPARTMENT APPLICANT
PRELIMINARY QUESTIONNAIRE

PLEASE CIRCLE YOUR RESPONSE TO EACH QUESTION BELOW:

1. ARE YOU A LEGAL RESIDENT OF THE UNITED STATES?
   YES  NO
2. DO YOU HAVE A HIGH SCHOOL DIPLOMA OR GED CERTIFICATE?
   YES  NO
3. ARE YOU 21 YEARS OF AGE OR OLDER?
   YES  NO
4. WILL YOU TAKE A POLYGRAPH EXAMINATION?
   YES  NO
5. HAVE YOU EVER BEEN OR ARE YOU IN THE MILITARY?
   YES  NO
   IF YES DID YOU RECEIVE A HONORABLE DISCHARGE?
   YES  NO  N/A
6. WILL YOU TAKE A PHYSICAL AGILITY TEST?
   YES  NO
7. WILL YOU SUBMIT TO A PSYCHOLOGICAL SCREENING (MMPI)?
   YES  NO
8. ARE YOU CURRENTLY ON PROBATION FOR DRIVING WHILE INTOXICATED OR OTHER TRAFFIC OFFENSE?
   YES  NO
9. HAVE YOU BEEN CONVICTED OF DRIVING WITH A SUSPENDED LICENSE OR FAILURE TO LEAVE IDENTIFICATION WITHIN THE LAST 5 YEARS?
   YES  NO
10. HAVE YOU HAD THREE OR MORE HAZARDOUS (MOVING) TRAFFIC CONVICTIONS WITHIN THE LAST 12 MONTHS?
    YES  NO
11. HAVE YOU HAD SIX OR MORE HAZARDOUS (MOVING) TRAFFIC CONVICTIONS WITHIN THE LAST 24 MONTHS?
    YES  NO
12. HAVE YOU BEEN CONVICTED OF DRIVING WHILE INTOXICATED OR DRIVING UNDER THE INFLUENCE OF DRUGS WITHIN THE LAST 10 YEARS?
    YES  NO
13. HAVE YOU EVER COMMITTED OR BEEN CONVICTED OF A FELONY?
    YES  NO
14. HAVE YOU EVER BEEN CONVICTED OF A CRIME INVOLVING A SEX OFFENSE?
   YES   NO
15. HAVE YOU USED, SOLD, OR DELIVERED ANY HARD DRUGS?
   YES   NO
16. HAVE YOU USED MARIJUANA IN THE LAST TWO YEARS?
   YES   NO
17. HAVE YOU EVER BEEN CONVICTED OF SPOUSAL ABUSE (DOMESTIC VIOLENCE)?
   YES   NO
18. DO YOU HAVE A PROTECTIVE ORDER AGAINST YOU?
   YES   NO

TO QUALIFY FOR FURTHER PROCESSING, YOU MUST HAVE ANSWERED QUESTIONS 1-4 & 6-7 WITH ‘YES’ AND QUESTION 8-18 WITH ‘NO’.

MUST BE 21 YEARS OF AGE
MUST POSSESS A VALID OK DRIVERS LICENSE AND ACCEPTABLE DRIVING RECORD.
MUST BE A CITIZEN OF THE UNITED STATES AND POSSESS A HIGH SCHOOL DIPLOMA OR THE EQUIVALENT.
DURING THE FIRST (12) MONTH OF EMPLOYMENT, MUST SUCCESSFULLY COMPLETE A BASIC POLICE ACADEMY AS TAUGHT BY THE COUNCIL OF LAW ENFORCEMENT EDUCATION & TRAINING (CLEET), WRITTEN PRACTICAL AND FIELD EXERCISES UNDER THE DIRECT SUPERVISION OF A FIELD TRAINING OFFICER (F.T.O.)

_________________________________________________________________________
APPLICANT NAME          DATE
# CITY OF ANADARKO

**Employment Application**

Human Resource Department  
501 West Virginia Ave.  
PO Box 647  
Anadarko, OK 73005  
Phone: 405-247-7819  
Fax: 405-247-5903  
Website: [www.cityofanadarko.org](http://www.cityofanadarko.org)

*An Equal Opportunity Employer*

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### Applicant Information

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Date:</th>
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<tr>
<td>Last</td>
<td>First</td>
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<tr>
<td>M.L.</td>
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<table>
<thead>
<tr>
<th>Address:</th>
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<tbody>
<tr>
<td>Street Address</td>
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<tr>
<td>City</td>
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<table>
<thead>
<tr>
<th>Phone</th>
<th>E-mail Address:</th>
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<tr>
<th>Date Available:</th>
<th>Social Security #:</th>
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<tr>
<td>Desired Salary:</td>
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### Position Applied for:

- Are you a citizen of the United States?  
  - YES  
  - NO  
  - If no, are you authorized to work in the U.S.?  
    - YES  
    - NO

- Have you ever worked for the City?  
  - YES  
  - NO  
  - If yes, when?

- Have you been convicted of a felony in the last 7 years?  
  - YES  
  - NO  
  - Do you hold a valid OK driver license?  
    - YES  
    - NO

- If yes, explain:
  
  - If yes give type and number:

- Are you related to any City employee or any member of the City Council? If yes give name.  
  - Yes  
  - No

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If you are under 18 years old, can you provide proof of your eligibility to work?  
  - Yes  
  - No

### Education

<table>
<thead>
<tr>
<th>High School:</th>
<th>Address:</th>
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<tbody>
<tr>
<td>From:</td>
<td>To:</td>
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| Did you graduate? | YES  
  NO  |
| Degree:      |          |

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<thead>
<tr>
<th>College:</th>
<th>Address:</th>
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<tr>
<td>From:</td>
<td>To:</td>
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</table>
| Did you graduate? | YES  
  NO  |
| Degree:  |          |

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<thead>
<tr>
<th>Other:</th>
<th>Address:</th>
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<tbody>
<tr>
<td>From:</td>
<td>To:</td>
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</table>
| Did you graduate? | YES  
  NO  |
| Degree: |          |

List any computer skills, certificates, licenses, or languages not mentioned or equipment you are qualified to operate:
### Professional References

*Please list three professional references.*

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Relationship</th>
<th>Company</th>
<th>Phone</th>
<th>Address</th>
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### Current or Previous Employment

<table>
<thead>
<tr>
<th>Company</th>
<th>Address</th>
<th>Phone</th>
<th>Supervisor</th>
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<thead>
<tr>
<th>Job Title</th>
<th>Starting Salary: $</th>
<th>Ending Salary: $</th>
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<tr>
<th>Responsibilities</th>
<th>From:</th>
<th>To:</th>
<th>Reason for Leaving:</th>
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<tbody>
<tr>
<td></td>
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<td>YES</td>
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</table>

May we contact your previous supervisor for a reference?  YES  NO

<table>
<thead>
<tr>
<th>Company</th>
<th>Address</th>
<th>Phone</th>
<th>Supervisor</th>
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<td>YES</td>
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<td></td>
<td>YES</td>
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</table>

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### Military Service

<table>
<thead>
<tr>
<th>Branch:</th>
<th>From:</th>
<th>To:</th>
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<tr>
<td>Rank at Discharge:</td>
<td>Type of Discharge:</td>
<td></td>
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<tr>
<td>If other than honorable, explain:</td>
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### Disclaimer and Signature

**DRUG SCREEN INFORMATION**

To assist in providing a drug free workplace, the CITY OF ANADARKO has a mandatory drug screen program for job applicants who are offered employment. All job offers are subject to a negative drug screen. If you are offered employment by the City department or division, you will be required to provide a urinalysis sample for drug screen purposes. The screen will be to identify the presence of controlled or other prohibited substances. Failure of the drug screen will result in denial of employment. Additional information on this program may be obtained by submitting a written inquiry to: Human Resources Director, CITY OF ANADARKO, 501 W Virginia Ave, Anadarko, OK 73005.

I certify that my answers are true and complete to the best of my knowledge. I hereby grant to the CITY OF ANADARKO permission to investigate any information included in the application and I agree to submit to medical examination, background checks and drug screening, if required. I understand that this application is not a contract for employment.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I acknowledge that I have read and understand this agreement.

| Signature: | Date: |
VOLUNTARY AFFIRMATIVE ACTION SURVEY

Voluntary Applicant Survey
The City of Anadarko adheres to the equal employment opportunity guidelines set forth by state and federal laws. This information is sought in good faith and is for analysis of affirmative action only. Submission of this information is confidential and will be removed immediately upon receipt of this application. Qualified applicants are considered for positions without regard to race, color, and religion, sex, national origin, age, and disability, marital or veteran status.

Date of Birth ________________________ Sex M____ FM____
(MM/DD/YYYY)

Race/Ethnic Group:
☐ White
☐ African-American
☐ Hispanic
☐ American Indian/Alaskan Native
☐ Asian/Pacific Islander
☐ Other/Two or More Races

Check any of the following that are applicable:

☐ Vietnam or Desert Storm Era Veteran
☐ Disabled Veteran
☐ Handicapped Individual

Position Desired ________________________________

THIS INFORMATION IS STRICTLY VOLUNTARY