

Application for Employment

An Equal Opportunity Employer

We welcome and appreciate your interest. Please provide all pertinent data and feel free to attach additional information where appropriate. If an accommodation is needed to complete this application, please let us know by calling (580) 338-2593 or emailing careers@myBOPbank.com. As an Equal Opportunity Employer, we do not discriminate against applicants or employees because of their age, race, color, religion, creed, national origin, sex, veteran status, disability, or any other basis prohibited by law. The Immigration Reform and Control Act of 1986 requires all employees to verify authorization to work in the United States. You will be advised of necessary verification procedures before employment begins. We reserve the right to reject any application that has not been fully completed.

Applicant Information

Date of Application				
Last Name	First Name	Middle Name		
Preferred Name		-		
Address				
City	State	Zip Code		
Cell Phone Number		Alternative Phone Number		
E-Mail		Are you over the age of 18?	Yes □	No □
Position Applied For (Please I	be specific)			
Full-Time \square Part-Time \square	Temporary \Box			
Salary Expected				
Date available to start		Referred by:		
Are you legally able to work i	n the United State	es? Yes 🗆 No 🗆		
Have you ever been employe	ed at any time in th	he past with Bank of the Panhandle?	Yes □	No 🗆
If yes, please provide dates (Start)	to (End)		
Have you previously applied	for a position with	n this Bank of the Panhandle?	Yes □	No 🗆
If yes, when did you apply? (I	Date)			
Have you ever been convicte	d of a crime or ple	ed guilty or "no contest" to a felony?	Yes □	No 🗆
If yes, state offense, date, co	urt, and place whe	ere conviction occurred:		
Where	When (date) _			
Charge				



Employment Experience

If you are including a resume with this information on it, you may skip this section. List last four employers, most recent experience first.

Name of Employer		Phone Number
Address		
City	State	Zip Code
Starting Date	Starting Position	Starting Wage
Ending Date	Ending Position	Ending Wage
Responsibilities		
Reason for Leaving	Nan	ne & Title of Supervisor
Name of Employer		Phone Number
Address		
City	State	Zip Code
Starting Date	Starting Position	Starting Wage
Ending Date	Ending Position	Ending Wage
Responsibilities		
Reason for Leaving	Nam	ne & Title of Supervisor



Name of Employer		Phone Number
Address		
City	State	Zip Code
Starting Date	Starting Position	Starting Wage
Ending Date	Ending Position	Ending Wage
Responsibilities		
Reason for Leaving	Nam	ne & Title of Supervisor
Name of Employer		Phone Number
Address		
City	State	Zip Code
Starting Date	Starting Position	Starting Wage
Ending Date	Ending Position	Ending Wage
Responsibilities		
Reason for Leaving	Nan	ne & Title of Supervisor



Education and Training If you are including a resume with this information on it, you may skip this section. High School Name _____ City _____ State ___ Diploma Yes □ No □ GED Yes □ No □ G.P.A. _____ **College Name** _____ State ____ Degree Yes □ No □ Major _____ College Name _____ City ____ State ___ Degree Yes □ No □ Major _____ Technical, Business or Other Schools Name City _____ State ___ Completed? Yes \square No \square Area of Study _____ Please list other special qualifications and certifications (i.e. language skills, trainings, etc.):



Certification

Please read the information below carefully and sign where indicated. This application is not valid unless it is signed.

I certify that the statements made in this application are true and correct to the best of my knowledge and understand that falsification of this information could result in withdrawal of my application for consideration and/or termination of my employment. Permission is hereby granted to obtain verification of the statements made here and to obtain references. I authorize the references listed in this application to release any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same.

In making this application for employment, I understand that an investigation may be made in which information is obtained through criminal conviction checks, educational record checks, credit checks, driving checks, and reference checks. This inquiry includes information regarding my character, general reputation, and personal characteristics. I understand that I have a right to make a written request within a reasonable time for a complete and accurate disclosure of additional information concerning the nature and scope of this inquiry.

As a condition of employment, I agree that all information which I receive in the course of my employment relating in any manner to the business activities, programs, concepts or designs of Bank of the Panhandle, or any of its affiliates are to be treated by me as trade secrets and kept in confidence, not to be disclosed to any authorized person either during or after my employment, or used by me in any manner adverse to the interests of Bank of the Panhandle.

I understand that if I am employed, my employment will not be for a definite duration and can be terminated at any time by either myself or my employer. I further understand that none of the company's personnel policies should be construed as a contract or as a guarantee of continued employment. No representative of Bank of the Panhandle or any of its affiliates, other than the President of the Company or his/her designee, has authority to enter into or approve any agreement for employment for any specified period of time or to approve any agreement contrary to the foregoing.

Should my services terminate after accepting employment, it is understood that Bank of the Panhandle or any of its affiliates may supply, in confidence, to any prospective employer my record, with no liability attaching to the company or any of its staff.

Signature	Date	
If you submit this application electronically, a typed name will be deemed as your signature.		



Notice of Criminal History Check & Permission to Perform Criminal History Investigation

Bank of the Panhandle performs a criminal history check with the Oklahoma State Bureau of Investigation on every applicant for employment.

By your signature below, you are giving Bank of the Panhandle permission to conduct a criminal history investigation through the Oklahoma State Bureau of Investigation with respect to the information below.

Name of Applicant	
Signature of Applicant If you submit this application electronically, a typed name	
Alias Names (including all married names)	
Date of Birth:	Social Security Number



Release of Employment/Personnel Information & Waiver of Confidentiality

Bank of the Panhandle checks prior employment references on all applicants for employment. In order to facilitate Bank of the Panhandle's investigation into your prior employment, please sign the following waiver and release.

n connection with my application for employment with Bank of the Panhandle, I (na nereby give permission to the following previous employers whom I have listed below:	ame)
1)	
2)	
3)	
o release information contained in my employment file and/or personnel file that concerns or relates to my work performance, work attitude, skills, character, and reason for leaving employment to Bank of the Panhandle and an agent, officer, or employee of Bank of the Panhandle. This waiver and release does not include or cover confidentian nedical information or information relating to work-related injuries that may be contained in my employment and personnel files.	ny ial
This constitutes my waiver of confidentiality and privacy, and a release of information contained in my employment and/or personnel files as stated above. A copy of this Release of Employment/Personnel Information and Waiver of Confidentiality shall have the same force and effect as an original.	
Name of Applicant	
ignature of Applicant	
f you submit this application electronically, a typed name will be deemed as your signature.	
ocial Security Number Date	