

# CAREER EMPLOYMENT SERVICE, INC.

Permanent and Temporary Staffing  
 2350 Nowata Place • Bartlesville, OK 74006  
 Phone 918-335-2300 FAX 918-335-2600  
 jobs@careeremploymentservice.com

## Please complete this form in Acrobat Reader rather than PDF Complete.

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex, religion, disability or national origin. You are not required to answer any of the following questions that you feel infringe on your privacy.

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Message Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Minimum Salary you will accept \_\_\_\_\_

Occupation Desired: 1st Choice \_\_\_\_\_ Yrs. exp. \_\_\_\_\_  
 2nd Choice \_\_\_\_\_ Yrs. exp. \_\_\_\_\_

Are you available to work: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Shift Work \_\_\_\_\_ Temporary \_\_\_\_\_

Select highest level completed: High School 1 2 3 4 GED College 1 2 3 4 5 6+

Name of High School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Name of College \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Major \_\_\_\_\_ Minor \_\_\_\_\_ G.P.A. \_\_\_\_\_

Special Training (Describe) \_\_\_\_\_

Business Training: Name of School \_\_\_\_\_ Course \_\_\_\_\_ Graduated \_\_\_\_\_

Date Available \_\_\_\_\_ May we call you at work? \_\_\_\_\_ Work Phone \_\_\_\_\_

If now employed, why do you desire to change your position? \_\_\_\_\_

**Skills: Check box to indicate training only or give length of work experience.**

<input type="checkbox"/> Accounting	Software:	<input type="checkbox"/> Mailroom	<input type="checkbox"/> Retail
<input type="checkbox"/> Bookkeeping:	<input type="checkbox"/> MS Access	<input type="checkbox"/> Switchboard	<input type="checkbox"/> Sales
<input type="checkbox"/> Full Charge	<input type="checkbox"/> MS Excel	<input type="checkbox"/> Multi-Line Phones	<input type="checkbox"/> Stocking
<input type="checkbox"/> Assistant	<input type="checkbox"/> MS Outlook	<input type="checkbox"/> Customer Service	<input type="checkbox"/> Inventory
<input type="checkbox"/> Accounts Receivable	<input type="checkbox"/> MS PowerPoint	Call Center:	<input type="checkbox"/> Engineering
<input type="checkbox"/> Accounts Payable	<input type="checkbox"/> MS Publisher	<input type="checkbox"/> Helpdesk	Type
<input type="checkbox"/> Bank Reconciliation	<input type="checkbox"/> MS Word	<input type="checkbox"/> Inbound	<input type="checkbox"/> Drafting
<input type="checkbox"/> Payroll	<input type="checkbox"/> Lotus 1-2-3	<input type="checkbox"/> Outbound	<input type="checkbox"/> CAD/Version
<input type="checkbox"/> Banking:	<input type="checkbox"/> Adobe PageMaker	<input type="checkbox"/> Receptionist	<input type="checkbox"/> Sheet Metal
<input type="checkbox"/> Teller	<input type="checkbox"/> Adobe Photoshop	<input type="checkbox"/> Typing/Speed	<input type="checkbox"/> Machinist
<input type="checkbox"/> Lender	<input type="checkbox"/> Adobe InDesign	<input type="checkbox"/> Statistical Typing	<input type="checkbox"/> Engine Lathe
<input type="checkbox"/> New Accounts	<input type="checkbox"/> Harvard Graphics	<input type="checkbox"/> Transcription	<input type="checkbox"/> Turret Lathe
<input type="checkbox"/> Cashier	<input type="checkbox"/> Peachtree	<input type="checkbox"/> Legal	<input type="checkbox"/> CNC Lathe
<input type="checkbox"/> Credit	<input type="checkbox"/> QuickBooks	Medical:	<input type="checkbox"/> Forklift
<input type="checkbox"/> Collections	<input type="checkbox"/> SAP	<input type="checkbox"/> X-Ray	<input type="checkbox"/> CDL
<input type="checkbox"/> Calculator by touch	Operating System:	<input type="checkbox"/> Medical Assistant	<input type="checkbox"/> Welding
<input type="checkbox"/> Data Entry	<input type="checkbox"/> MS Windows	<input type="checkbox"/> Coding	<input type="checkbox"/> Manufacturing
Other:	<input type="checkbox"/> MS Vista	<input type="checkbox"/> Certifications	<input type="checkbox"/> Electrical
Computer:	<input type="checkbox"/> Macintosh		<input type="checkbox"/> Electronics
<input type="checkbox"/> IBM, Dell, etc.	<input type="checkbox"/> Oracle	Insurance:	<input type="checkbox"/> Janitorial
<input type="checkbox"/> Macintosh	<input type="checkbox"/> Linux	<input type="checkbox"/> Medical	<input type="checkbox"/> Landscape
Certifications, languages other:	<input type="checkbox"/> Unix	<input type="checkbox"/> Property & Casualty	<input type="checkbox"/> Construction
	Other:	<input type="checkbox"/> Policy Writing	<input type="checkbox"/> Plumbing
		Other:	<input type="checkbox"/> Heat & Air
			Licenses & Other:

**EMPLOYMENT EXPERIENCE:**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		Work Performed
	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		Work Performed
	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		Work Performed
	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		Work Performed
	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			

Were you ever discharged from a position? Explain \_\_\_\_\_

Where did you hear of our service? \_\_\_\_\_

Are you a veteran of the U.S. Armed Forces \_\_\_\_\_ What branch? \_\_\_\_\_ Length of Service \_\_\_\_\_ Date of Discharge \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_

Give three references other than Relatives:

	Name	Address	Phone
(1)	_____	_____	_____
(2)	_____	_____	_____
(3)	_____	_____	_____

I certify that the information contained in this application is correct to the best of my knowledge, and understand that falsification of this application in any detail is grounds for disqualification from further consideration or for dismissal from employment in accordance with company policy. I acknowledge that consideration for employment is contingent on the results of reference and background checks. Therefore, I hereby authorize the company to (1) investigate the truthfulness of all statements made on this application, (2) contact my former employers and other listed references or any other person who can verify information, and (3) discuss the results of any investigation with other employees of the company involved in the hiring process. In addition, I give my consent for all contacted persons including former employers to provide information concerning this application, and I release each such person from liability for providing information to the company.

Print form and sign here \_\_\_\_\_ Date \_\_\_\_\_

Please email your resume to [jobs@careeremploymentservice.com](mailto:jobs@careeremploymentservice.com)