



Application Supplement

Employee information

Form with fields for Employee Social Security number, User ID, Employee last name (First, Middle), Mailing street address, City, State, Zip, Area code, Main phone, County number/name, Marital status (Married, Single, Divorced), Gender (Male, Female), Date of birth, U.S. citizen (Yes, No), and military obligation.

Race. This information is requested for statistical purposes:

Only check one:

- White, Hispanic, Black, Alaskan native, American Indian (verification required), Asian or Pacific Islander, American Indian - without verification

Special note: Any person who lists American Indian as race or national origin must, within 30 days of his or her appointment, verify tribal affiliation by providing a Certificate of Degree of Indian Blood from the U.S. Department of Interior, Bureau of Indian Affairs, or by providing the name and address of tribal officials who can verify tribal affiliation. If unable to provide verification, check American Indian - without verification.

Education, check highest level attained.

- Less than high school, High school diploma/GED, Associate, Bachelor, Juris Doctor, Master, Doctor of Dental Science, Doctor of Medicine, Doctorate of Philosophy

Form with fields for Granting institution, do not abbreviate, State, and Year graduated

Major for bachelor (social work and related):

- Aging/gerontology, Child development/family relations and child development, Counseling, Early childhood education, Juvenile justice, Psychology, Sociology, Social work

Major for master (social work and related): _____

- | | | | | | |
|--|--------------------------|------------------------------------|--------------------------|------------------|--------------------------|
| Behavioral studies | <input type="checkbox"/> | Human relations | <input type="checkbox"/> | Sociology | <input type="checkbox"/> |
| Child development/family relations and child development | <input type="checkbox"/> | Psychology | <input type="checkbox"/> | Juvenile justice | <input type="checkbox"/> |
| Early childhood education | <input type="checkbox"/> | Guidance and counseling/counseling | <input type="checkbox"/> | Social work | <input type="checkbox"/> |
- Other major, do not abbreviate: _____

Person to contact in case of emergency

Name	Area code	Phone	Relationship
Street address	City	State	Zip

Employee signature Date

For positions that require criminal history record checks:

I understand OKDHS will obtain a criminal history record as a condition of employment.

Employee signature Date

Use these county number codes for county name and number:

- | | | | | |
|--------------|-------------|---------------|-----------------|----------------|
| 01 Adair | 17 Cotton | 33 Jackson | 49 McIntosh | 65 Roger Mills |
| 02 Alfalfa | 18 Craig | 34 Jefferson | 50 Murray | 66 Rogers |
| 03 Atoka | 19 Creek | 35 Johnston | 51 Muskogee | 67 Seminole |
| 04 Beaver | 20 Custer | 36 Kay | 52 Noble | 68 Sequoyah |
| 05 Beckham | 21 Delaware | 37 Kingfisher | 53 Nowata | 69 Stephens |
| 06 Blaine | 22 Dewey | 38 Kiowa | 54 Okfuskee | 70 Texas |
| 07 Bryan | 23 Ellis | 39 Latimer | 55 Oklahoma | 71 Tillman |
| 08 Caddo | 24 Garfield | 40 LeFlore | 56 Okmulgee | 72 Tulsa |
| 09 Canadian | 25 Garvin | 41 Lincoln | 57 Osage | 73 Wagoner |
| 10 Carter | 26 Grady | 42 Logan | 58 Ottawa | 74 Washington |
| 11 Cherokee | 27 Grant | 43 Love | 59 Pawnee | 75 Washita |
| 12 Choctaw | 28 Greer | 44 Major | 60 Payne | 76 Woods |
| 13 Cimarron | 29 Harmon | 45 Marshall | 61 Pittsburg | 77 Woodward |
| 14 Cleveland | 30 Harper | 46 Mayes | 62 Pontotoc | |
| 15 Coal | 31 Haskell | 47 McClain | 63 Pottawatomie | |
| 16 Comanche | 32 Hughes | 48 McCurtain | 64 Pushmataha | |

Form 11PE201E is completed at the time the employee enters on duty and submitted to Human Resources Management Division (HRMD) with the Form 11AD068E, Report of Accession, packet. This form is also used to request criminal background investigations on employees.

For positions requiring a criminal background investigation, the employee completes this form and the local office submits a copy of the form through division channels to request a background investigation from Oklahoma State Bureau of Investigations (OSBI).