



Dusty Ricks
Superintendent

Denny Prince
Assistant Superintendent

Mike Eubank
Assistant Superintendent

Randy Henderson
Director of Student Services

Malachi Blaxton
Program Director

Wade Jarlesberg
BIS Director

APPLICATION FOR EMPLOYMENT

Position Applied for: STAP HEALTHCARE COORDINATOR Date: 4/1/2021
~~3/24/2021~~

MID-AMERICA TECHNOLOGY CENTER considers all applicants for employment without regard to race, color, religion, gender, national origin, age or disability, or status as a Vietnam-era or special disabled veteran in accordance with federal law. This includes, but is not limited to admissions, employment, financial aid, and educational services. In addition, MID-AMERICA TECHNOLOGY CENTER complies with applicable state and local laws prohibiting discrimination in employment in every jurisdiction in which it maintains facilities. MID-AMERICA TECHNOLOGY CENTER also provides "reasonable accommodations" to qualified individuals with disabilities, in accordance with the Americans with Disabilities Act and applicable state and local laws. Mike Eubank is the Coordinator of MID-AMERICA TECHNOLOGY CENTER's effort to assure nondiscrimination.

Name Tamara Hicks Social Security Number
Address 8401 North Jordan City Lexington State OK Zip 73051
Phone (405) 365-7026 Other Phone(s) E-mail hicks1nhdaz@gmail.com

How did you hear about this opening?

Have you ever been employed by Mid-America? YES NO If yes, when? Current + Adjunct instructor

State name(s) of any relative(s) in our employ, and your relationship to them:

Are you over the age of 18? YES NO If not, state your age and birth date:

Do you want to work (circle one) FULL-TIME? PART-TIME? If part-time, specify days and hours you can work:

Do you want to work on a temporary basis? YES NO If yes, state limitations on when you would be available to work:

Date you can begin to work: Salary desired: Are you willing to work overtime: YES NO

Are you able to perform the essential functions of the position for which you have applied, with or without reasonable accommodation? YES NO

Have you ever been convicted of a crime? YES NO If yes, state nature of offense, when, where, and nature of the case.*

* A conviction record will not necessarily be a bar to employment. This information will be used for job related purposes and only to the extent permitted by applicable law.

Federal laws require that employers hire only individual who are authorized to be lawfully employed in the United States, in compliance with such laws, all offers of employment are subject to verification of each applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization, upon employment.

Are you authorized to work for all employers in the United States on a full-time basis, or only for your current employer?

All employers ☐

Current employer only ☐

RECORD OF EDUCATION

NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DID YOU GRADUATE?	CERTIFICATE, DIPLOMA, OR DEGREE EARNED
MATC Wayne, OK	Practical Nursing	1	yes	Certificate
Seminole State Seminole, OK	Applied Science in Nursing	2	yes	Associate Degree

MILITARY SERVICE RECORD

Have you ever served in the U.S. Armed Forces? YES ☒ NO ☐ If Yes, list any job-related duties in the service, including special training that is relevant to the position for which you have applied.

SKILLS, LICENSES, and/or Trade/Professional CERTIFICATIONS (that you believe are related to the job for which you are applying, and specifically qualify you to work at MID-AMERICA):

Registered Nurse: Oklahoma Board of Nursing
Skill training in wound care, infection control,
IV therapy

MEMBERSHIPS, AWARDS, ADDITIONAL TRAINING

Please list job-related memberships, awards, or training that you believe qualify you for the position for which you are applying. Please do not include any job-related memberships, awards, or training which may tend to indicate the applicant's gender, age, race, national origin, religion, disability, or status as a Vietnam-era or special disabled veteran.

Training and experience in infection control,
COVID-19 related infection control, wound care,
IV therapy.

ADDITIONAL INFORMATION

Additional information about yourself that you believe would be helpful in appraising your qualifications for the position for which you are applying:

My experience in longterm care and as a Director of Nursing has helped me to identify needs in our current healthcare system. As a graduate of MATC the passion I have to take these needs, create training programs and expand the health careers department is immense.

PRIOR WORK HISTORY

(List in order, last or current employer first. Please account for any gaps in your employment.)

DATES FROM/TO:	NAME, ADDRESS AND TELEPHONE NUMBER OF EMPLOYER	PAY RATE BEGINNING /FINAL	SUPERVISOR'S NAME/TITLE	WORK PERFORMED/REASON FOR LEAVING
08/2018- Current	MATC - Wayne, OK (405) 449-3391	\$32/hr	Kelly Reid	Currently employed
10/2012 - Current	Lexington Nursing Home 432 S.E. 3rd St Lexington, OK 73051 (405) 527-6531	\$18/hr - \$12,000/yr	Rick Horton Administrator	Currently employed
08/2006 - 06/2007	First Call Staffing 7925 N May Ave OKC, OK (405) 842-7775	\$16.50/hr	On call Scheduler	decided to be a stay at home Mom

REFERENCES

NAME	ADDRESS	TELEPHONE	E-MAIL	TITLE/POSITION
Lisa Musgrove	936 Louise Terrace Purcell, OK 73080	(405) 238-0803	LMusgrove@matech.edu	LPN Program Coordinator
Dallas Krout		(405) 742-2611	dkrout@matech.edu	BIS Adult Program Coordinator
✓ Emily Hitch	3917 24th Ave S.E. Apt #1 Norman, OK 73071	(405) 514-7465	hinshaw.emily@gmail.com	Assistant DON - LNH
✓ Vicki Fryar	1610 Wind Hill Rd. Norman, OK 73071	(405) 203-3419	vfryar@aol.com	LPN Charge Nurse
✓ Toni Hoy	160 North 84th Norman, OK 73068	(405) 380-5922	toni@ehcok.com	Director of Operations, RN
Shea Cross	1461 N. 4th Ave Ste 202 Purcell, OK 73080	(405) 623-4752	shealeacross@gmail.com	Nurse Practitioner family medicine

PRE-EMPLOYMENT STATEMENT

(Please read carefully and sign the statement below)

I understand and agree that:

1. The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification of refusal of employment, or if employed, termination from MID-AMERICA TECHNOLOGY CENTER's employ. I further certify that I, the undersigned applicant have personally completed this application.
2. Any offer of employment I may receive from MID-AMERICA TECHNOLOGY CENTER is contingent upon my successful completion of MID-AMERICA TECHNOLOGY CENTER's total pre-employment screening process, including MID-AMERICA's receipt of references that it considers satisfactory, and my satisfactory completion of any post-offer pre-employment medical examination that MID-AMERICA TECHNOLOGY CENTER may require. I also agree, if employed, to submit to a medical examination at any time MID-AMERICA TECHNOLOGY CENTER requests, in accordance with any applicant law. I hereby consent to having the results of any post-offer pre-employment or post-employment medical exams I may be required to take disclosed to MID-AMERICA TECHNOLOGY CENTER.
3. I understand that as a condition of employment, I may be required to undergo and successfully pass a screening for alcohol and / or drugs. I also understand and agree that, if employed, I may be required to submit to alcohol or drug screening at any time at the discretion of MID-AMERICA TECHNOLOGY CENTER. I hereby consent to having the results of any such alcohol or drug screening I may be required to undergo disclosed to MID-AMERICA TECHNOLOGY CENTER.
4. I authorize and request that all of my present and former employers and those individuals I have listed as personal references furnish information about my employment record, including a statement of the reason for the termination of my employment, work, performance, abilities, and other qualities pertinent to my qualifications for employment. I further authorize my present and former employers and those individuals I have listed as personal references to disclose to MID-AMERICA TECHNOLOGY CENTER any and all letter, reports and other information pertaining to my employment with them, without giving me prior notice of such disclosure. In addition, I hereby release MID-AMERICA TECHNOLOGY CENTER, my present and former employers and those individuals I have listed as personal references from any and all claims, demands, or liabilities arising out of or in any way related to such investigations or disclosure.
5. In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of MID-AMERICA TECHNOLOGY CENTER. I understand nothing contained in this application or conveyed to me during any interview which may be granted is intended to create an employment contract, express or implied, between me and MID-AMERICA TECHNOLOGY CENTER. I further understand that no administrator or representative of MID-AMERICA, other than the Superintendent, subject to the approval of the Board of Education, has any authority to enter into any agreement with me for employment with MID-AMERICA TECHNOLOGY CENTER, and that any such agreement, if any, shall be in writing, signed by the Superintendent and approved by the Board of Education.
6. I understand that if offered employment, I will, as a condition of my employment, be required to submit proof of my identity and legal right to work in the United States on or before my first day of employment.
7. If the position for which I have applied requires driving an automobile or a school bus in the course of work, I understand that I will be required to possess a current, valid, and appropriate Oklahoma drivers license or a school bus license, and I understand that I may be required to provide a copy of my driving record and proof of insurance.
8. I have reviewed the essential job functions of the position applied for, and hereby certify that I am able to do them with or without a reasonable accommodation.
9. In processing my application for employment, I understand that MID-AMERICA TECHNOLOGY CENTER may obtain or have prepared a consumer or investigative report for employment purposes, concerning my prior employment, military record, education, credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, criminal background, or mode of living. I understand that upon written request to MID-AMERICA TECHNOLOGY CENTER, I will be informed whether an investigative consumer report was requested, and given full information as to the nature and scope of this investigation. (I understand that an investigative consumer report is a report in which information concerning my character, general reputation, personal characteristics, or mode of living, is obtained through personal interviews with neighbors, friends or associates with whom I am acquainted.) By signing below, I am authorizing MID-AMERICA TECHNOLOGY CENTER to obtain a consumer or investigative consumer report on me as a part of MID-AMERICA TECHNOLOGY CENTER's pre-employment background screening process. If I am offered employment by MID-AMERICA TECHNOLOGY CENTER, I further authorize MID-AMERICA TECHNOLOGY CENTER to obtain additional consumer reports on me for employment purposes at any time during my employment. By my signature below, I also acknowledge that MID-AMERICA TECHNOLOGY CENTER has provided me with a summary of my rights under the Federal Fair Credit Reporting Act.
10. I understand that the request for the information above will be used to acquaint MID-AMERICA TECHNOLOGY CENTER with my qualifications for employment, and does not in any way constitute an offer of employment.

My signature below certifies that I have read and understand this Pre-employment Statement and agree to the terms and conditions outlined herein.

Tamara M. Hicks

Printed Name of Applicant

Tamara M Hicks 04/02/2021

Signature of Applicant

Date