

WILDLIFE CONSERVATION COMMISSION

Mike Bloodworth CHAIRMAN	John D. Groendyke MEMBER
M. David Riggs VICE CHAIRMAN	Bruce Mabrey MEMBER
John Zelbst SECRETARY	Dan Robbins MEMBER
Ed Abel MEMBER	Harland Stonecipher MEMBER



MARY FALLIN, GOVERNOR  
RICHARD T. HATCHER, DIRECTOR  
wildlifedepartment.com

P.O. Box 53465 Oklahoma City, OK 73152 PH. (405) 521-3851

## 2013 Paddlefish Research Internship Application

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### INSTRUCTIONS

To be considered, your completed application **MUST INCLUDE** the following items:

1. Personal Info / Faculty Internship Authorization page
2. Essay
3. ODWC Application for Employment (5 pages)
4. ODWC background check form
5. College transcript indicating a natural resource curriculum

This application process is competitive, therefore only complete applications can be considered.

Please mail (or deliver) entire completed application packet to the ODWC Jenks Office  
Attention: Paddlefish Research Internship at PO Box 1201 Jenks, OK 74037.

**Application deadline is Friday January 18, 2013.**

Successful applicants will be notified by January 25, 2013.

There will be a mandatory orientation session in Jenks at 6pm Tuesday February 5, 2013.  
Pizza will be provided.

The positions begin March 1 and end April 30, 2013.

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P.O. Box 53465 Oklahoma City, OK 73152 PH. (405) 521-3851

**Paddlefish Research Internship**

**Personal Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

University: \_\_\_\_\_

Year in School: FR, SO, JR, SR Major: \_\_\_\_\_ (Please include a transcript.)

Are you able to travel to Miami, OK (near Grand Lake)? \_\_\_\_\_

Please indicate your work availability: WEEKDAYS (Tues – Thurs), WEEKENDS (Sat – Sun), BOTH/EITHER

Some of the work involved will take place outdoors, in inclement weather, and will be physically tasking. Are you able to lift a 50lb object? \_\_\_\_\_

Are you currently or have you been previously employed by ODWC in any capacity? YES / NO  
 Where and when? \_\_\_\_\_

**Essay Instructions**

On a separate page or pages, please type a brief essay which describes your interests in this internship and in your future as it pertains to fish and wildlife. At minimum, please answer the following:

- 1) What do you hope to learn or gain from this internship experience with ODWC?
- 2) Considering that this application process is competitive, what makes you stand out among other candidates?
- 3) What are your collegiate and career goals?

**Faculty / Internship Credit Authorization**

To be completed by university faculty member:

My signature below indicates that I have discussed the benefits and requirements of this ODWC internship with the student named above and I support his or her participation. The student will earn undergraduate research or internship credits in the amount listed below upon satisfactory participation and completion of the ODWC internship.

Faculty signature: \_\_\_\_\_

Faculty name (please print): \_\_\_\_\_

Credit hours for internship\*: \_\_\_\_\_ Course Code: \_\_\_\_\_

*\*Work hours will take place during the period March 1 to April 30, 2013. Interns will be required to work a minimum of 16 hours per credit. Ideally, these hours will be distributed over the eight week period to maximize student exposure to various activities.*

# Oklahoma Department of Wildlife Conservation

*An Equal Opportunity Employer*

## Application for Employment



**(Type or Print)** Do not use pencil

Date: \_\_\_\_\_ Position Applying For: \_\_\_\_\_

Name: \_\_\_\_\_  

Last
First
Middle

Address: \_\_\_\_\_  

Street
City
State
Zip Code

Telephone: (Home) \_\_\_\_\_ Social Security Number: \_\_\_\_\_

(Work or Cell) \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Email: \_\_\_\_\_ Driver's License State: \_\_\_\_\_

If applying for internship, what period of time would you be available to work? \_\_\_\_\_

Will you accept work in any area of the state? \_\_\_\_\_ If no, specify preference: \_\_\_\_\_

When will you be available for employment? \_\_\_\_\_

Are you willing to travel in the performance of your duties? \_\_\_\_\_ Overnight? \_\_\_\_\_ A week at a time? \_\_\_\_\_

How did you learn about this job? \_\_\_\_\_

Are you a U.S. Citizen? \_\_\_\_\_ If not a U.S. Citizen, please provide alien registration number: \_\_\_\_\_

Are you related to anyone currently working for the Department of Wildlife? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, list their name(s) and how you are related: \_\_\_\_\_

Have you ever been convicted of any offense including traffic violations: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain below:

\_\_\_\_\_

Convictions are not an absolute bar to employment, but will be considered in relation to specific job requirements.

\_\_\_\_\_

Your previous residences for the past ten years: Use additional sheet of paper if necessary.

Dates	Street Address	City	State
From			
To			
From			
To			
From			
To			
From			
To			

Oklahoma Department of Wildlife Conservation

APPLICANT EEO DATA FORM

The information requested is optional and is being collected for the purpose of reporting to Federal and Equal Employment Opportunity Agencies and will not be considered as part of the application for employment.

★ This form will be separated from the application ★

Name: Last First M.I.

Address: Mailing Address

City State Zip Code

Day Phone ( ) Social Security Number:

Position Applied for:

Voluntary Information

Gender: Male Female Birth Date: Month-Day-Year Ethnic Origin (check one) W - White B - Black H - Hispanic P - Asian/Pac. Islander I - Am. Ind./Alaskan O - Other

How did you find out about this job?

- State Employee Newspaper Job Fair College/University Career Day Professional Publication Television O.D.W.C.'s Human Resource Office Agency Web Site - Internet Other:

Signature

Date

The Oklahoma Department of Wildlife Conservation will make all decisions regarding recruitment, hiring, promotions, terminations, and other terms and conditions of employment without discrimination on grounds of age, race, color, creed or religion, sex, national origin, physical or mental disability, or other factors which cannot be lawfully used as the basis for employment decision.

The Department hires only U.S. Citizens and aliens authorized to work in the United States.



# Employment History

List all employment, STARTING WITH PRESENT OR MOST RECENT EMPLOYER. Account for **all periods**, including unemployment and military service during the past ten years. Use additional sheet of paper, if necessary.

Dates	Name, address, phone of employer	Job Title	Supervisor's Name	Salary	Reason for Leaving
From To					

**Summary of your duties and responsibilities for the above listed jobs as relates to position applying for:** \_\_\_\_\_

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**History of experience as a supervisor:** \_\_\_\_\_

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**If you have Military service, please complete the following:** (write N/A if not applicable) \_\_\_\_\_

Date(s) of Military Service: \_\_\_\_\_ to \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Full-time? \_\_\_\_\_ National Guard or Reserve? \_\_\_\_\_

Highest rank attained: \_\_\_\_\_

What was your job or specialty? \_\_\_\_\_

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Type of discharge: \_\_\_\_\_ **Honorable** \_\_\_\_\_ **Other than Honorable** (Explain below if Other than Honorable)

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List three references (preferably previous employers) not related to you:

<u>Name</u>	<u>Address</u>	<u>Telephone</u>

List office, scientific, industrial or farm equipment, machinery or heavy tools you can effectively operate, and rate your ability on each, if appropriate to position applied for:

	Below Average	Average	Above Average

List any other special skills you have: \_\_\_\_\_

You may include samples of papers or reports you have written. **These items will not be returned to you.**

### Education

Attended (Mo. and Yr.)	Type of School	School Name and Location	Graduated? Yes or No	Degree (BS, etc.)	Major field of Study
From	High School				
To					
From					
To					
From	College or University				
To					
From					
To					

\* Transcript enclosed: Yes \_\_\_\_\_ No \_\_\_\_\_

**\* When the position requires college courses or degree, you must enclose a copy of your college transcripts before this application is complete and can be reviewed. To receive credit for education beyond high school, a transcript or certificate must be enclosed.**

	Corres., Business, Trade, etc.				

Why would you like a job with this Department? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly state your qualifications for the position you are applying for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Pre-Employment Statement

I give the Department of Wildlife Conservation the right to make a thorough investigation of my past employment and activities, including the release of employment, education, financial, legal, and other records, and I agree to cooperate in such investigation. I release from all liability or responsibility all persons, companies, corporations or agencies providing investigative information. I consent to taking such pre-employment physical, mental and drug-use text examinations as may be required by the Department. I agree to abide by such laws or rules as set by or observed by the Oklahoma Wildlife Conservation Commission. I understand that any false answers or statements made by me on this application, or any supplement thereto or in connection with the above mentioned investigation, will constitute justification for immediate termination of my employment.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application must be signed.**

*The Oklahoma Department of Wildlife Conservation emphasizes a policy of Equal Employment Opportunity. Decisions regarding recruitment, hiring, terminations and other terms and conditions of employment are made without discrimination on grounds of race, color, age, creed or religion, sex, national origin, disability or other factors which cannot be lawfully used as the basis for an employment decision.*

### Please Note:

Be sure application is complete and return to:

[www.wildlifedepartment.com](http://www.wildlifedepartment.com)

Oklahoma Department of Wildlife Conservation  
Attention: Paddlefish Research Internship  
PO Box 1201  
Jenks, OK 74037  
or in person at the ODWC Jenks Office 918-299-2334



## CONFIDENTIAL

### Information for Background Check

**Applicant's Name:** \_\_\_\_\_

**Maiden Name:** \_\_\_\_\_

**List any alias or nicknames:** \_\_\_\_\_

\_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, & Zip Code:** \_\_\_\_\_

**Home phone:** (\_\_\_\_\_) \_\_\_\_\_

**Race:** \_\_\_\_\_ **Gender:** Male Female **Date of Birth:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**Current Driver's License #:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Have you had a Driver's License from another State?** YES NO

**If yes what State(s):** \_\_\_\_\_

**Remarks or Comments:**