

**OKLAHOMA STATE BUREAU OF INVESTIGATION
POSITION ANNOUNCEMENT**

POSITION TITLE: DIRECTOR Job Code - 4557
PIN # 30800082

ANNUAL SALARY: \$80,138.10

NUMBER OF OPENINGS: ONE

LOCATION: Oklahoma State Bureau of Investigation Headquarters, OKC
Reports to: OSBI Commission

JOB DESCRIPTION:

The Director's powers and duties are as set forth in Title 74 O.S. 150. 7.

JOB REQUIREMENTS:

Applicants must meet the statutory qualifications for Director as set forth in Title 74 O.S.150.6: the Director shall be a professional law enforcement officer who possesses a bachelor's degree from an accredited college or university and who shall have a minimum of five (5) years' experience in criminal investigation and or law enforcement or five (5) years' experience as an agent with said Bureau and must have at least two (2) years' experience in an administrative position.

ADDITIONAL FACTORS:

1. This position is established in the unclassified service.
2. Nepotism governed by O.S. Title 21 Chapter 16.
3. The selection process may consist of one or more of the following: oral interviews; performance examinations; written examinations; evaluations of training and/or education. Applicants must complete all phases of the selection process to be considered.

DATE OPENED: July 27, 2010 **APPLICATION DEADLINE:** October 1, 2010, 5:00 P.M.

QUESTIONS FOR THIS POSITION SHOULD BE DIRECTED TO:

MITZI BENNETT, HUMAN RESOURCES DIRECTOR – (405) 879-2656

APPLICATION PROCEDURES:

Applicants must meet the minimum qualifications for the announced position. Applicants meeting these criteria may apply by submitting an OSBI Employment Application and Director Questionnaire, available at www.osbi.ok.gov no later than 5:00 p.m. on the date of the application deadline, to:

**Oklahoma State Bureau of Investigation,
Human Resources Director
6600 N. Harvey, Oklahoma City, OK 73116
Telephone: (405) 848-6724; TDD: (405) 843-7303.**

Any qualified applicant with a disability may request reasonable accommodation to complete the application/interview process. The specific nature of the accommodation requested and the reason for the request should be provided at the time of initial application.

EQUAL OPPORTUNITY EMPLOYER

The OSBI is an Equal Opportunity Employer.



OKLAHOMA STATE BUREAU OF INVESTIGATION APPLICATION INSTRUCTION SHEET AND ACKNOWLEDGEMENT

Applicant Name: _____

Title of position you are applying for: _____

I. INSTRUCTIONS

Please complete this application in neat, legible handwriting using blue or black ink, or type the information. Applications completed using pencil will not be accepted and will be returned to the applicant. Applications that are illegible or incomplete will be returned to the applicant.

The information **MUST** be accurate in all respects. Any applicant giving false information or omitting pertinent information will be subject to disqualification before or after an offer of conditional employment or to termination after employment begins.

If a question is not applicable to you, enter "N/A" in the space provided.

If additional work history space is needed, make copies of page 3 of the Pre-Employment Application and attach these pages within the application in the appropriate sequence

II. CONDITIONS AND RESTRICTIONS OF APPLICATION FOR EMPLOYMENT

A. Qualified Applicant

Individuals who are applying for classified Merit positions are considered to be applicants only after all of the following have been accomplished.

1. The established minimum requirements for the job class to which recruitment is being made have been met.
2. Proper application and documentation to the Office of Personnel Management (or eligibility for reinstatement and/or interagency transfer) have been submitted and approved by the Office of Personnel Management.
3. The applicant has been placed upon the recruitment register maintained by the Office of Personnel Management or has been approved as a special handicapped applicant, pursuant to Title 74 O.S. 840.19(H).
4. A letter of invitation from the OSBI to participate in a selection process has been received and accepted
5. A properly completed OSBI employment application and other required documents have been returned within the established deadlines.
6. Timely contact has been made with the OSBI to schedule an interview (if an interview is required).
7. Timely appearance for the interview has been made (if an interview is required) and the applicant completes or is willing to complete all subsequent steps of the pre-employment selection process.

Individuals who fail to complete items #1 through #7 are NOT qualified applicants even though a completed employment application or a request for reinstatement, inter-agency transfer, non-competitive appointment has been received, or other type of employment inquiry, including an informal interview, may have occurred.

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APPLICANT NAME: _____

B. Status of Active Application

Applications submitted by qualified applicants will only be considered to be in active status until:

- the applicant is disqualified,
- the applicant is hired,
- the position is withdrawn or eliminated, or
- the position is otherwise filled.

The OSBI may withdraw its recruiting efforts to fill a position at any time during the selection/hiring process.

If not hired for this position, this application is no longer active, and the applicant will need to re-apply for future vacancies after having met the conditions as previously described in II.A.

III. PRE-EMPLOYMENT SELECTION PROCESS

The pre-employment selection process consists of the following:

1. an evaluation of qualified applicants, either through review of the application, interview, or any other screening method required by the OSBI, and
2. a conditional offer of employment to the selected qualified applicant and an acceptance.

IV. POST-EMPLOYMENT OFFER BACKGROUND INVESTIGATIVE PROCESS

Applicants who accept a conditional offer of employment will be required to successfully undergo the following after completion of a conditional post-offer background investigation questionnaire and completion of required release forms.

1. A polygraph examination
2. A pre-employment drug screen (selected positions)
3. A psychological evaluation (commissioned applicants only)
4. An extensive background investigation

AS A QUALIFIED APPLICANT FOR EMPLOYMENT WITH THE OSBI, I AGREE:

To participate in and cooperate with the OSBI's background investigation process if made a conditional offer of employment. Further, I understand that my failure to satisfy any portion of the selection/hiring process may disqualify me from further consideration for employment with the Oklahoma State Bureau of Investigation.

Applicant's Signature

Date

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II. WORK HISTORY

Dates of Employment: From (Mo/Yr) _____ To (Mo/Yr) _____ Full-time Part-time
Average Hours per Week _____ Starting Salary \$ _____ per _____ Ending Salary \$ _____ per _____
Name and Address of Employer _____

Employer's Telephone: _____ Your Title While Employed: _____

Description of Your Duties: _____

Name at least two individuals who supervised or evaluated your work performance: _____

of Persons You Supervised : _____

Name(s) of Co-worker(s): _____

Reason for Leaving: _____

Not Employed: From (Mo/Yr) _____ To (Mo/Yr) _____

Dates of Employment: From (Mo/Yr) _____ To (Mo/Yr) _____ Full-time Part-time
Average Hours per Week _____ Starting Salary \$ _____ per _____ Ending Salary \$ _____ per _____
Name and Address of Employer _____

Employer's Telephone: _____ Your Title While Employed: _____

Description of Your Duties: _____

Name at least two individuals who supervised or evaluated your work performance: _____

of Persons You Supervised : _____

Name(s) of Co-worker(s): _____

Reason for Leaving: _____

Not Employed: From (Mo/Yr) _____ To (Mo/Yr) _____

II. WORK HISTORY, CONTINUED

Dates of Employment: From (Mo/Yr) _____ To (Mo/Yr) _____ Full-time Part-time

Average Hours per Week _____ Starting Salary \$ _____ per _____ Ending Salary \$ _____ per _____

Name and Address of Employer _____

Employer's Telephone: _____ Your Title While Employed: _____

Description of Your Duties: _____

Name at least two individuals who supervised or evaluated your work performance: _____

of Persons You Supervised : _____

Name(s) of Co-worker(s): _____

Reason for Leaving: _____

Not Employed: From (Mo/Yr) _____ To (Mo/Yr) _____

Dates of Employment: From (Mo/Yr) _____ To (Mo/Yr) _____ Full-time Part-time

Average Hours per Week _____ Starting Salary \$ _____ per _____ Ending Salary \$ _____ per _____

Name and Address of Employer _____

Employer's Telephone: _____ Your Title While Employed: _____

Description of Your Duties: _____

Name at least two individuals who supervised or evaluated your work performance: _____

of Persons You Supervised : _____

Name(s) of Co-worker(s): _____

Reason for Leaving: _____

Not Employed: From (Mo/Yr) _____ To (Mo/Yr) _____

IF ADDITIONAL WORK HISTORY EXISTS, ATTACH EXTRA COPIES OF THIS PAGE.

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II. WORK HISTORY, CONTINUED

1. Have you ever been fired or asked to resign? YES _____ NO _____
If "yes," give details (include name of employer): _____

2. Have you ever been disciplined in any of your employment? YES _____ NO _____
If "yes," explain (include name of employer): _____

4. Would any problem result if your present employer were contacted during the course of the background investigation? YES _____ NO _____ If "yes," when should such contact be made? _____

NOTE: No final offer of employment will be made without contacting your current employer.

III. MOTOR VEHICLE LICENSE INFORMATION

(Complete this section only if job tasks require driving. Refer to job task document enclosed.)

1. Are you a licensed driver? YES _____ NO _____
If "yes," provide the following information.
License Number _____ State of issue _____
License Type _____ Expiration date _____
Restrictions _____

2. List any other states in which you have been licensed to operate a motor vehicle.

3. Have you ever been refused a driver's license to operate a motor vehicle? YES _____ NO _____
If "yes," please explain: _____

4. List all traffic citations (exclude parking violations) you have received within the last 7 years.
Nature of Violation City/State Approximate Date Action Taken

5. Have you been involved as a driver in a motor vehicle accident within the past 7 years?
YES _____ NO _____ If "yes," give details (include what, when, where, why).

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IV. EDUCATIONAL HISTORY

1. High School Attended _____ Graduated YES _____ NO _____
City and State _____ Dates Attended _____

2. College or University Attended _____
City and State _____ Dates Attended _____
College Hours Completed _____ Major/Minor _____
Degree, if any, and date _____ GPA _____

• College or University Attended _____
City and State _____ Dates Attended _____
College Hours Completed _____ Major/Minor _____
Degree, if any, and date _____ GPA _____

• College or University Attended _____
City and State _____ Dates Attended _____
College Hours Completed _____ Major/Minor _____
Degree, if any, and date _____ GPA _____

IF ADDITIONAL COLLEGE/UNIVERSITY HISTORY EXISTS, ATTACH ADDITIONAL COPIES OF THIS PAGE.

3. List any other schools attended (*trade, vocational, business, etc.*). Give name and address of school, dates attended, course of study, certificate, and any other pertinent information:

4. Were you ever suspended or expelled while attending school?
YES _____ NO _____ If "yes," please give details. _____

5. List any other special skills or qualifications you may possess. _____

V. FRIENDS, ACQUAINTANCES, OR FAMILY MEMBERS EMPLOYED BY THE OSBI

Complete Name

Location

Length of Acquaintance

VI. MISCELLANEOUS

- 1. Other than incidents resulting in sealed juvenile records, have you ever been arrested or convicted of a felony crime, serious misdemeanor, or crime involving moral turpitude?
 YES____ NO____ If "yes," describe in detail._____

NOTE: Confidentiality requirements do not apply to juveniles who were tried as adults or as Youthful Offenders. 10 O.S. 7303-4.3, 7306-1.1, 7306-2.2 and 7306-2.6A set the parameters for juveniles who are treated as adults or Youthful Offenders. Generally, a juvenile or Youthful Offender is treated as an adult when they have committed murder; kidnapping; robbery with a dangerous weapon; robbery in the first degree if personal injury results; rape in the first degree; rape by instrumentation; use of firearm or other offensive weapon while committing a felony; arson in the first degree; burglary with explosives; burglary in the first or second degree after three or more adjudications for committing burglary in the first or second degree; shooting with intent to kill; discharging a firearm, crossbow or other weapon from a vehicle; intimidating a witness; manslaughter in the first degree; sodomy; trafficking in illegal drugs; manufacturing, distributing, dispensing or possessing with intent to manufacture, distribute or dispense a controlled dangerous substance, or assault and battery with a deadly weapon. (10 O.S. 7306-1.1) Consequently, criminal records regarding these crimes are not confidential, and these records must be listed above.

- 2. Other than crimes that would have been sealed in juvenile records, have you ever committed a felony crime, serious misdemeanor, or a crime involving moral turpitude that went undetected or unsolved? YES____ NO____
 If "yes," describe in detail, including nature, dates, and duration of illegal activity. Describe any illegal use of controlled dangerous substances by explaining the type of drug used, how many times you used it, and over what period of time (years) the use occurred (including your age at the first time used).

NOTE: Confidentiality requirements do not apply in this instance to undetected or unsolved crimes when a juvenile would have been treated as an adult or Youthful Offender (see comments on Question 1 in this part).

Undetected crimes include any illegal use of controlled dangerous substances. Failure to reveal illegal drug use at this time may be grounds for disqualification.

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VI. MISCELLANEOUS, CONTINUED

3. Are you a U.S. citizen or, if you are not a U.S. citizen, are you approved to work in the United States? YES _____ NO _____

NOTE: Proof of eligibility will be required before you can be employed.

4. Earliest date you are available for employment: _____

VI. AFFIRMATION

I hereby authorize the Oklahoma State Bureau of Investigation to verify the information I have provided in this employment application, in my oral statements and in any other documents or supplemental information I have provided to the OSBI for the purposes of employment. I release the OSBI and any employee acting on its behalf from any and all causes of action that may accrue to me as a result of said verification and disclosure of records.

I certify that all information I have supplied to the OSBI in this application and in any other form, oral or written, is true and accurate. I understand and agree that any misstated, misleading, incomplete, or false information is grounds for my disqualification from consideration for employment, for withdrawal of any offer of employment if an offer has been made, or for my immediate discharge if employment has already commenced, whenever and however discovered.

If successful in my application, I understand I may be offered employment conditional upon the satisfactory completion of a post-offer employment questionnaire, thorough background investigation, polygraph examination, drug screen, and/or psychological evaluation. If offered employment with the OSBI, I agree to participate in this process. I understand that refusal to participate in any part of the background investigation process may result in my disqualification from consideration for employment or withdrawal of a conditional offer if one has been made.

I understand that nothing in this application is intended to imply or create an employment relationship or contract of employment.

Date of Signature

Signature of Applicant

State of Oklahoma
County of _____

Subscribed and Sworn to before me on this _____ day of _____, _____.

Notary Public

My Commission Expires: _____

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OSBI APPLICANT DRUG QUESTIONNAIRE

In accordance with Title 74 O.S. § 150.8 and the Oklahoma Drug-free Workplace Act, the OSBI screens its applicants for a history of illegal drug use. The OSBI is charged with enforcement of all laws of the State of Oklahoma and provides the drug analysis laboratories for all Oklahoma law enforcement agencies. Therefore, illegal drug use by OSBI employees would be unacceptable. To be considered for employment with OSBI, it is mandatory that applicants being considered complete this form prior to the interview. Noncompliance with this requirement may result in non-consideration for employment. This questionnaire will be disclosed only to the appropriate OSBI officials with a need to know or as required by law.

APPLICANT NAME _____ SSN _____
 (Please Print)

Please indicate whether you are currently using and the date, if any, on which you last used any of the following substances. Do not include instances in which the substance was prescribed, administered, or dispensed to you by a licensed physician in compliance with the law for treatment of an actual medical condition from which you suffer(ed) at the time of dispensation.

SUBSTANCE	ARE YOU CURRENTLY USING THIS SUBSTANCE?	DATE YOU LAST USED/TRIED THIS SUBSTANCE?	TOTAL # OF TIMES USED	CHECK (X) IF NEVER TRIED/USED
MARIHUANA	yes____ no____	_____ (approx. yr.)	_____	_____
HASHISH/ HASH OIL	yes____ no____	_____ (approx. yr.)	_____	_____
COCAINE/ CRACK	yes____ no____	_____ (approx. yr.)	_____	_____
PCP	yes____ no____	_____ (approx. yr.)	_____	_____
HEROIN	yes____ no____	_____ (approx. yr.)	_____	_____
OPIUM	yes____ no____	_____ (approx. yr.)	_____	_____
Including Derivatives: Hydrocodone (Vicodin, Lorcet, Tussionex) Hydromorphone (Dilaudid) Oxycodone (Percocet, Percodan)	yes____ no____	_____ (approx. yr.)	_____	_____
LSD	yes____ no____	_____ (approx. yr.)	_____	_____
AMPHETAMINE/ METHAMPHETAMINE (Circle the substance used)	yes____ no____	_____ (approx. yr.)	_____	_____

LIST ANY OTHER CONTROLLED SUBSTANCE(S)
 _____ (approx. yr.) _____

I certify that the information provided above is correct and complete. I understand any conditional offer of employment is made based upon the information provided in the Pre-Employment Application, during any interview with any OSBI representative, and on this drug questionnaire. Any misstatement of fact or omission of information may subject me to disqualification for further consideration in the hiring process or to withdrawal of conditional offer if one has been made.

 Signature of Applicant _____ Date
 State of Oklahoma
 County of _____ Subscribed and Sworn to before me on this _____ day of _____, _____
 Notary Public _____ My Commission Expires: _____

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Oklahoma State Bureau of Investigation

OSBI DIRECTOR APPLICANT QUESTIONNAIRE

- Question #1: What are your views on the future of the OSBI? Describe what you believe would be the priority goals of the organization.
- Question #2: How do you want the public to perceive the OSBI, and what would you do, as chief spokesperson for the organization, to achieve that public perception?
- Question #3: How do you perceive the role of OSBI Director at the state capitol in matters dealing with the legislature?
- Question #4: What or who do you view as the greatest threat to the continued success of the OSBI as an agency, and what would you do as Director to address and deal with such a threat.

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