

Langston University

Agency, Authority, Commission, Department or Institution

PO Box 1205, Langston, OK 73050

Address, City and Zip Code

Print Name of Officer or Employee

LOYALTY OATH (51 O.S., 36.2A)

I do solemnly swear (or affirm) that I will support the Constitution and the laws of the United States of America and the Constitution and the laws of the State of Oklahoma, and that I will faithfully discharge, according to the best of my ability, the duties of my office or employment during such time as I am

Here put name of office, or if an employee, insert "An employee of _____" followed by the complete designation of the employing officer, agency, authority, commission, department or institution.) 51 O.S., 36.2.

Affiant Sign Here

State of _____

County of _____

Signed and sworn to (or affirmed) before me on this _____ day of

_____, _____ by _____.

Print name of the person taking the oath.

Signature of the Notary

(Seal, if any)

Title and Rank (if other than a notary)

My Commission Expires: _____

Commission Number: _____

LOYALTY OATH FILING

(51 O.S. §36.3)

WHERE TO FILE:

Every **state officer** shall be filed with the Secretary of State.

Every **state employee** shall be filed with the personnel officer of the state entity employing the state employee.

All **other officers** shall be filed with the office of the county clerk of the county of official residence of the officer.

All **other employees** shall be filed with the office of the county clerk of the county in which the entity employing the employee is located.

Every **notary public** shall be filed with the office of the court clerk of the county of official residence of the notary, or if a nonresident, the county of employment of the notary.

All **municipal officers or employees or school district officers or employees** shall be filed in the office of the municipal clerk of the municipality or in the office of the school clerk of the school district for which the officer or employee serves or by which the officer or employee is employed.

TO ENSURE PROPER FILING:

Submit only the original oath with original signatures. Photo copies are not accepted. Type or print clearly in black ink:

1. List the name and address of the entity.
2. Full and correct name of the person taking the oath
3. Name of the office, or if an employee, insert “an employee of _____” followed by the complete designation of the employing officer, agency, authority, commission, department or institution.

Person taking the oath is the “Affiant”.

ATTESTATION OF LOYALTY OATH:

The Loyalty Oath must be signed and dated by a notary public or other officer authorized to administer oaths or affirmations (indicate title and rank, if other than a notary public) and include the identification of the jurisdiction in which the act is performed. The notary shall include the name of the individual making the statement (or taking the oath), the notary seal, expiration date and commission number.

Please retain a copy for your records before submitting the oath for filing.

For additional information, please call 522-4564 or 522-4565.