
Name of State Agency, Authority, Commission, Department or Institution

Address, City and Zip Code Agency, Authority, Commission, Department or Institution

Print Name of State officer or Employee (Affiant)

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.)

Signature of Affiant

State of _____

County of _____

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

_____, _____ by _____.

Print name of person taking the oath

Signature of Notary Public, or other officer
authorized to administer oaths or affirmations.

(Seal, if any)

Title and Rank (if other than a Notary Public)

My Commission Expires: _____

Commission Number: _____