

EMPLOYMENT APPLICATION

OVGFACILITIES.COM

LAST NAME	FIRST NAME	MIDDLE INITIAL

POSITION APPLIED FOR

Part-Time

PART-TIME OR FULL-TIME

DATE COMPLETED

OVG360 IS AN EQUAL OPPORTUNITY EMPLOYER



IT IS THE POLICY OF OVG360 TO PROVIDE EQUAL EMPLOYMENT OPPORTUNITIES TO ALL INDIVIDUALS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, AGE, NATIONAL ORIGIN OR ANCESTRY, CITIZENSHIP, DISABILITY, SEXUAL ORIENTATION, MARITAL STATUS, VETERAN STATUS, OR ANY OTHER BASIS PROTECTED BY FEDERAL, STATE OR LOCAL LAWS. ALSO, TO THE EXTENT REQUIRED BY LAW, EQUAL EMPLOYMENT OPPORTUNITIES WILL BE PROVIDED TO ALL INDIVIDUALS REGARDLESS OF ANY PERCEPTION THAT THE INDIVIDUAL HAS A PROTECTED CHARACTERISTIC, OR A SSOCIATES WITH A PERSON WHO HAS OR IS PERCEIVED AS HAVING ANY PROTECTED CHARACTERISTICS.

(Last Name)	(First N	lame)	(Middle Name)	
(Address)	((City)	(State)	(Zip Code)
(Telephone Number)		(Email Address)		
s there any other name under				
If yes, indicate name records ar Can you, within three (3) days a				eligible to work
in the United States? Yes		accumentation verifying tha	a you are regard	ongibio to work
How did you learn about us?				
Are you related to any employe	e of the company? PYes	s □No		
If yes, Name:	Rela	ationship:		
Have you ever worked for Spec	tra/OVG360 or any of our	partner companies before?	□Yes □ No	
Date(s): to: _	Re	eason for Leaving:		
Position:	Supervise	or's name:		
Applica	ants under the age of 18 will	not be considered for full-time	employment.	
EDUCATION: (May or may not l	be considered depending	on job applied for.)		
Describe any educational degre	ees, skills, training or expo	erience you believe are relev	vant:	
Do you possess a High School	diploma or GED certifica	te: □Yes □No		
College/University	Degree	Course of Study	Number of	years completed
Graduate School	Dearee	Course of Study	Number of	vears complete



DAYS AVAILABLE: (Check appropriate box)

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

AM	
PM	
Are there any days, shifts or hours you will not wo	
MPLOYMENT HISTORY: Please complete for ful	Il time/part-time employment.
Company Name:	Telephone Number: ()
Address:	bates Employed: to: to:
Name of Supervisor:	Job Title:
Reason for leaving:	May we contact? □Yes □No
Company Name:	Telephone Number: ()
Address:	bates Employed: to:to:
Name of Supervisor:	Job Title:
Reason for leaving:	May we contact? □Yes □No
Company Name:	Telephone Number: ()
Address:	Dates Employed:to:to:
Name of Supervisor:	Job Title:
Reason for leaving:	May we contact? □Yes □No
REFERENCES: Please list three (3) employment	references. Please list at least one (1) supervisor.
Name Organization/Company Name	Telephone
	()
Name Organization/Company Name	Telephone
	()
Name Organization/Company Name	Telephone



APPLICANT'S ACKNOWLEDGMENT (Please read carefully and sign.)

I CERTIFY THAT THE INFORMATION I HAVE GIVEN HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY MISREPRESENTATION, OMISSIONS OF FACTS OR INCOMPLETE ANSWERS IN ANY APPLICATION DOCUMENT WILL DISQUALIFY ME FROM FURTHER CONSIDERATION FOR EMPLOYMENT. I FURTHER UNDERSTAND THAT, IF EMPLOYED, ANY MISREPRESENTATIONS OR OMISSIONS OF FACTS IN ANY APPLICATION DOCUMENT WILL BE CAUSE FOR MY IMMEDIATE DISMISSAL.

I UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT WITH THE EMPLOYER IS NOT FOR A SPECIFIC TERM AND MAY BE TERMINATED BY ME OR THE EMPLOYER WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME, UNLESS I AM OTHERWISE COVERED BY A COLLECTIVE BARGAINING AGREEMENT. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER POLICY, CUSTOMER BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE EMPLOYER'S PERSONNEL HANDBOOK OR ANY PERSONNEL MANUALS) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE EMPLOYER, OTHER THAN A COLLECTIVE BARGAINING AGREEMENT TO WHICH I AM SUBJECT.

I AUTHORIZE INVESTIGATION OF ALL MATTERS OUTLINED IN THIS APPLICATION. I HEREBY GIVE THE COMPANY AND/OR ITS DESIGNATED SUBSCRIBER PERMISSION TO CONTACT PREVIOUS EMPLOYERS, DOCTORS, MEDICAL PROVIDERS, REFERENCES, AND TO CONDUCT INVESTIGATIVE BACKGROUND INQUIRES ON ME INCLUDING CONSUMER CREDIT, CRIMINAL CONVICTIONS, MOTOR VEHICLE AND OTHER REPORTS FROM VARIOUS FEDERAL, STATE AND OTHER AGENCIES THAT MAINTAIN RECORDS RELATED TO THE ABOVE MENTIONED ITEMS, AS WELL AS, CLAIMS RECORDS ON FILE AT INSURANCE COMPANIES. I HEREBY RELEASE THE COMPANY AND ANY PERSON GIVING OR RECEIVING ANY SUCH INFORMATION FOR ANY PURPOSE RELATED TO MY EMPLOYMENT FROM ANY LIABILITY AS A RESULT OF SUCH CONTACTS. INFORMATION REGARDING CREDIT HISTORY AND DRIVING HISTORY WILL NOT BE INQUIRED INTO UNLESS IT IS NECESSARY AND DIRECTLY RELATED TO THE JOB APPLIED FOR INTHIS APPLICATION.

Applicant's Signature	3	Date



DISCLOSURE AND CONSENT CONCERNING CONSUMER AND INVESTIGATIVE CONSUMER REPORTS

This form, which you should read carefully, has been provided to you because Spectra may request Consumer Reports and/or Investigative Consumer Reports from a consumer reporting agency. The Company will use any such report(s) solely for employment-related purposes. Consumer Reports or Investigative Consumer Reports will be obtained from CSS Inc. ("CSS") located at 20 E. Clementon Rd, Suite 201-S, Gibbsboro NJ, 08026. They can be contacted at 856-627-5600. Under the provisions of the Fair Credit Reporting Act, 15 USC, Section 1681 et seg., the Americans with Disabilities Act, the Drivers Privacy Protection Act and all other applicable federal, state, and local laws, I hereby authorize and permit CSS, to obtain a consumer report and/or an investigative consumer report which may include the following: Reports may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include, but are not limited to: credit reports, social security number, criminal records checks, public court records checks, including civil, driving records, educational records, verification of employment positions held, workers compensation records, personal and professional references, licensing, certification, etc. The information contained in these reports may be obtained by CSS from private or public record sources including sources identified by you in your job application or through interviews or correspondence with your past or present coworkers, neighbors, friends, associates, current or former employers, educational institutions or other acquaintances.

Additional State Law Notices: Please see the next page to read the additional notices that may be relevant to you if you live in or are applying for work in any of the following states: California, Maine, New York, Washington, Massachusetts, Minnesota, Vermont, Oklahoma, Connecticut, Oregon, or New Jersey.

CONSENT

I have carefully read and understand this Disclosure and Consent form and, by my signature below, consent to the release of consumer and/or investigative consumer reports, as defined above, to the Company in conjunction with my application for employment. I further understand that any and all information contained in my job application or otherwise disclosed to the Company by me before, during or after my employment, if any, may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the Company. I understand that if the Company hires me, it may request a consumer report and/or an investigative consumer report about me, as defined above, for employment-related purposes during the course of my employment. I understand that my consent will apply throughout my employment, to the extent permitted by law, unless I revoke or cancel my consent by sending a signed letter or statement to the Company at any time. This Disclosure and Consent form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the Company.

I acknowledge that I have received the	attached State Law Notices. (Pl	ease initial)
I acknowledge that I have received the (Please initial)	ne attached Summary of Right	s under the Fair Credit Reporting Act.
Further, I acknowledge receipt of the attached required by law, any related state summary of r		the Fair Credit Reporting Act and, as
Applicant Last Name: First Social Security #: Will be collected during interview Dar Drivers License Number: Leave blank, will be collected during interview.	te of Birth (for ID purposes only):_	
Present Address:		
City/State/Zip		
Applicant Signature	Date	
California, Maine, Massachusetts, Minnesota, Net I wish to receive a free copy of any Consumer Repo		·



A Summary of Your Rights Under the Fair Credit Reporting Act

Para informacion en espanol, visite <u>www.consumerfinance.gov/learnmore</u> o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20006.

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20006.

- You must be told if information in your file has been used against you. Anyone who
 uses a credit report or another type of consumer report to deny your application for credit,
 insurance, or employment or to take another adverse action against you must tell you,
 and must give you the name, address, and phone number of the agency that provided the
 information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify
 information in your file that is incomplete or inaccurate, and report it to the consumer
 reporting agency, the agency must investigate unless your dispute is frivolous. See
 www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be



removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- Consumer reporting agencies may not report outdated negative information. In most
 cases, a consumer reporting agency may not report negative information that is more than
 seven years old, or bankruptcies that are more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about
 you only to people with a valid need usually to consider an application with a creditor,
 insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for
 access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.