



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 SPECTRA 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 ASSOCIATES WITH A PERSON WHO HAS OR IS PERCEIVED AS HAVING ANY PROTECTED CHARACTERISTICS.

(Last Name) (First Name) (Middle Name)

(Address) (City) (State) (Zip Code)

(Telephone Number) (Email Address)

Is there any other name under which you have employment or education records? ☐ Yes ☐ No

If yes, indicate name records are listed under: _____

Can you, within three (3) days after employment, submit documentation verifying that you are legally eligible to work in the United States? ☐ Yes ☐ No

How did you learn about us? _____

Are you related to any employee of the company? ☐ Yes ☐ No

If yes, Name: _____ Relationship: _____

Have you ever worked for Spectra or any of our partner companies before? ☐ Yes ☐ No

Date(s): _____ to: _____ Reason for Leaving: _____

Position: _____ Supervisor's name: _____

Applicants under the age of 18 will not be considered for full-time employment.

EDUCATION: (May or may not be considered depending on job applied for.)

Describe any educational degrees, skills, training or experience you believe are relevant:

Do you possess a High School diploma or GED certificate: ☐ Yes ☐ No

College/University	Degree	Course of Study	Number of years completed
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Graduate School	Degree	Course of Study	Number of years completed
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DAYS AVAILABLE: (Check appropriate box)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

Are there any days, shifts or hours you will not work? ☐ Yes ☐ No

If yes, please explain: _____

Please list your minimum salary requirements: _____

EMPLOYMENT HISTORY: Please complete for full time/part-time employment.

Company Name: _____ Telephone Number: () _____

Address: _____ Dates Employed: _____ to: _____

Name of Supervisor: _____ Job Title: _____

Reason for leaving: _____ May we contact? ☐ Yes ☐ No

Company Name: _____ Telephone Number: () _____

Address: _____ Dates Employed: _____ to: _____

Name of Supervisor: _____ Job Title: _____

Reason for leaving: _____ May we contact? ☐ Yes ☐ No

Company Name: _____ Telephone Number: () _____

Address: _____ Dates Employed: _____ 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 IN THIS APPLICATION.

Applicant's Signature

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 seq., 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. (Please initial)

_____ I acknowledge that I have received the attached Summary of Rights under the Fair Credit Reporting Act. (Please initial)

Further, I acknowledge receipt of the attached summary of my rights under the Fair Credit Reporting Act and, as required by law, any related state summary of rights.

Applicant Last Name: _____ First: _____ Middle: _____

Social Security #: _____ Date of Birth (for ID purposes only): _____

Drivers License Number: _____ State of Issue: _____

Present Address: _____

City/State/Zip _____

Applicant Signature _____ Date _____

California, Maine, Massachusetts, Minnesota, New Jersey & Oklahoma Applicants Only:

☐ I wish to receive a free copy of any Consumer Report and/or Investigative Consumer Report on me that is requested.



A Summary of Your Rights Under the Fair Credit Reporting Act

Para informacion en espanol, visite www.consumerfinance.gov/learnmore 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 identity 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.