



## **Employment Application**

				App	olicant I	nforma	ation					
Full Name:										Date:		
	Last			Firs	st				M.I.			
Address:	Street Addres	:s									Apartment/Unit	#
											,	
	City								State		ZIP Code	
Phone:						Email:_						
Date Availab	ole:		Last 4	4 Digits	of Socia	l:			Desire	d Salary	:\$	
Position App	olied for:					_Referra	al Sourc	e:				
Are you a cit	tizen of the U	Jnited S	States?	YES	NO	If no, a	ire you a	authori	ized to w	ork in th	YES e U.S.?	NO
Have you ev	er worked fo	or this c	ompany?	YES	NO	If yes, v	when?_					
Have you ev	er been con	victed c	of a felony?	YES	NO							
If yes, provid	de as much d	detail as	s possible: _									
					Educ	ation						
High School	: <u> </u>				Address:							
Did you graduate?	YES	NO	Diploma:									
College:					Address:							
Did you graduate?	YES	NO	Degree:									
Other degree/certif	fication:				Address:							
From:	1	Го:	Dic	d you g	raduate?	YES	NO	Deg	gree:			
					Military	Servic	e					
Branch:								From:			To:	
Rank at Disc	charge:					Туре	of Discl	harge:	<u> </u>			
If other than	honorable,	explain:										

	Previous Employment	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:\$	Ending Salary:\$
Responsibili	ties:	
From:	To: Reason for Leaving:_	
May we con	YES NO tact your previous supervisor for a reference?	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:\$	Ending Salary:\$
Responsibili	ties:	
From:	To: Reason for Leaving:_	
May we con	YES NO tact your previous supervisor for a reference?	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:\$	Ending Salary:\$
Responsibili	ties:	
From:	To: Reason for Leaving:_	
May we con	YES NO tact your previous supervisor for a reference?	

	References		
Please list t	hree professional references.		
Full Name:		Relationship:	
Company:		Phone:	
Address:	City:	ST:	Zip:
Full Name:		Relationship:	
Company:		Phone:	
Address:	City:	ST:	Zip:
Full Name:		Relationship:	
Company:		Phone:	
Address:	City:	ST:	Zip:
	Disclaimer and Signature		
I certify that	my answers are true and complete to the best of my knowled	dge.	
	ation leads to employment, I understand that false or mislead ay result in my release.	ling information in I	my application or
Ops Plus, Ii	nc. is an EEO/AA employer and we do not tolerate discriminat	tion.	

Signature: Date:

## **BACKGROUND SCREENING RELEASE & AUTHORIZATION FORM**

In connection with my application for employment (including contract for services or volunteer services) or tenancy with **Ops Plus, Inc.,** consumer reports will be requested. These consumer reports (investigative consumer reports in California) may include, as applicable, the following types of information: names and dates of previous employers/landlords, salary, work/tenant experience, education, accidents, licensure, credit (except California), social media, etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record, workers' compensation claims, judgments, evictions, bankruptcy proceedings, criminal records, etc., from federal, state and other agencies which maintain such records.

In addition, investigative consumer reports as defined by the federal Fair Credit Reporting Act, gathered from personal interviews with former employers/landlords and other past or current associates of mine to gather information regarding my work/tenant performance, character, general reputation, personal characteristics and lifestyle may be obtained.

# I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY THE CONSUMER REPORTING AGENCY TO FURNISH THE ABOVE-MENTIONED INFORMATION.

I have the right to make a request to the consumer reporting agency: VeriCorp, Inc., P.O. Box 436054, Louisville, KY 40253-6054; telephone (877) 717-3515 ("Agency"), upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information and the agency, on our behalf, will provide a complete and accurate disclosure of the nature and scope of the investigation covered by any consumer report(s); and the recipients of any reports on me which the agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). **I hereby consent to your obtaining the above information from the agency.** You may view their privacy policy at their website: www.vericorphr.com.

I hereby authorize procurement of consumer report(s) and investigative consumer report(s), including the release of all criminal history records. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for you to procure consumer reports at any time during my employment (or contract) period.

	California,	Minnesota	and	Oklahoma	Applicants	only:	Check	box	if you	request a	copy	of	any	consumer	report
order	ed on you.														

## **Notice to California Applicants:**

You have the right under Section 1786.22 of the California Civil Code to contact the Agency during reasonable hours (9:00

a.m. to 5:00 p.m. (ETZ) Monday through Friday) to obtain all information in your file for your review. You may obtain such information as follows: 1) In person at the Agency's offices, which address is listed above. You can have someone accompany you to the Agency's offices. Agency may require this third party to present reasonable identification. You may be required at the time of such visit to sign an authorization for Agency to disclose to or discuss your information with this third party; 2) By certified mail, if you have previously provided identification in a written request that your file be sent to you or to a third party identified by you; 3) By telephone, if you have previously provided proper identification in writing to Agency; and 4) Agency has trained personnel to explain any information in your file to you and if the file contains any information that is coded, such will be explained to you.

## **Notice to New York Applicants:**

For consumers applying for work in New York: I acknowledge receiving a copy of Article 23-A of the New York Correction

Law. (Initials)

I acknowledge that I have been provided a copy of consumer's rights under the Fair Credit Reporting Act.

APPLICANT SIGNATURE:	DATE:
Rev. 09.18	

Applicant Information prov	ided below:			
Please Print Clearly				
FIRST NAME	MIDDLE NAME		LAST NAME	
COCKAL CECUIDITIANA DED	DATE OF DIDITIA	(11/	A CE CHECK ONE	
SOCIAL SECURITY NUMBER	DATE OF BIRTH (mn		ASE CHECK ONE	
		Ma	le Female	
Al' - (Mr. ' I - (D) - ( ' NI - ( - ( - ( - ) II				1
Alias/Maiden/Previous Name(s) U FIRST NAME	SE THE DACK OF THIS FORM IF		LAST NAME	WEADS LISED
FIRST NAME	MIDDLE NAME	, 1	LASI NAME	YEARS USED
List all addresses, including curren	nt address, for the past 7 v	ears. Use the back of this fo	rm if more space is need	ed.
ADDRESS	CITY	STATE	COUNTY & ZIP CODE	TO - FROM
		+		
	L	4		1
Complete if applying for a position	n that may involve driving	a motor vehicle.		
DRIVERS LICENSE NUM		STATE ISSUED	EXPIRA	TIONDATE

EMAIL ADDRESS (If you wish to be contacted this way)



## EQUAL EMPLOYMENT OPPORTUNITY AND AFFIRMATIVE ACTION QUESTIONNAIRE

Ops Plus, Inc, is an Equal Employment Opportunity Employer This survey is for APPLICANTS FOR EMPLOYMENT

Emplo	yee Name:Current Position:
action submit have a ensure to accu	formation update below is <b>required by state and federal regulations</b> for statistical and affirmative purposes and absolutely does not influence current or future employment decisions. Information red is <b>will be kept confidential</b> . This form is to be completed voluntarily and failure to do so will not negative impact on your employment. However, Ops Plus, Inc. <b>must have each form returned</b> to all employees have been given the opportunity to self-identify and in order for Ops Plus, Inc. to able rately report statistics to the federal government.
Sex: ( <sub>]</sub>	lease check one):
	Male
	Female
Ethnic	Group: (please check one):
	Hispanic or Latino – all persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race (if you have selected this category, it is not necessary to select from the racial groups, found below)  Non-Hispanic/Latino (if this category is checked, please select from the racial groups found below)
	Groups: If Non-Hispanic/Latino was selected above, please check one of the below race
catego	ries:
	White (Not Hispanic or Latino): all persons having origins in any of the original people of Europe, North Africa, or the Middle East
	Black or African American (Not of Hispanic origin): All persons having origins in any of the black racial groups of Africa
	Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) – any persons having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands
	Asian (Not Hispanic or Latino) – all persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
	American Indian or Alaskan Native (Not Hispanic or Latino) - all persons having origins in any of the original peoples of North or South America, and who maintain cultural identification through tribal affiliation or community attachment
	Two or More Races (Not Hispanic or Latino) – all persons who identify with more than one of the above races
Declin	e Self Identification: If you do not wish to self identify your gender, ethnicity or race please
check	<u>the box below</u>
	I do not wish to self identify
Qu	estion/comment: HR Representative Tammy Mercer Ph: (502) 454-9767 x 221

Thank you - This information is submitted voluntarily, will be kept confidential, will be exclusively utilized for EEO statistical gathering and compliance purposes.

Continued Employee Name:
<u>VETERAN/DISABILITY SELF-IDENTIFICATION FORM</u>
It is the policy at Ops Plus, Inc. to provide equal employment and advancement opportunities to all qualified individuals. To achieve this goal, Ops, Plus, Inc. is dedicated to taking affirmative action to employ and advance in employment, <b>qualified disabled persons</b> , <b>disabled veterans</b> , <b>veterans of the Vietnam Era</b> , <b>and other protected veterans</b> . All personnel actions, including recruitment, hiring, training, and promoting persons in all job titles, will be administered without regard to disability or Vietnam Era veteran status, and all employment decisions are based solely on valid job requirements.
Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. Information you submit about your disability or veteran status will be kept <b>confidential</b> , except that (1) supervisors and managers may be informed regarding restrictions on the work or duties of individuals with disabilities, and regarding necessary accommodations; (2) first aid and safety personnel may be informed, when and to the extent appropriate, if the condition might require emergency treatment; and (3) government officials engaged in enforcing discrimination laws may be informed. The information provided will not be used in a manner inconsistent with section 503 of the Rehabilitation Act of 1973 and section 402 of the Vietnam Era Veterans Readjustment Assistance Act of 1974.
Please check the applicable categories:
☐ Disabled is a person is disabled if he or she has a physical or mental impairment which substantially limits one or more of such person's major life activities, has a record of such impairment, or is regarded as having such an impairment
□ Special Disabled Veteran is (i) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under the laws administered by the Department of Veterans Affairs for disability (A) rated at 30 percent or more, or (B) rated at 10 or20 percent in the case of a veteran who has been determined under Section 30 U.S.C. 3106 to have a serious employment handicap or (ii) a person who was discharged or released from active duty because of a service-connected disability
□ Veteran of the Vietnam Era is a person who: (i) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released there from with other than a dishonorable discharge, if any part of such active duty was performed: (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in all cases; or (ii) was discharged or released from active duty in the U.S. military, ground, naval or air service for a service-related disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961, and May 7,1975; or (B) between August 5, 1964, and May 7, 1975 in any other location
☐ Other Protected Veteran is a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized
□ Newly Separated Veterans is any veteran who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of such veteran's discharge or release from active duty
Questions/comments: HR Representative Tammy Mercer Ph: 502-454-9767 x 221
Decline Self Identification: If you do not wish to self identify your veteran or disability status, please check the box below

 $\Box$  I do not wish to self identify

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

## A Summary of Your Rights Under the Fair Credit Reporting Act

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 20552.

- 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 <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a> 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 <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a> 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.
- Consumers have the right to obtain a security freeze. You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit. As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years. A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

### **TYPE OF BUSINESS:**

- 1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.
- b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:
- 2. To the extent not included in item 1 above:
- a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks
- b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act
- c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations
- d. Federal Credit Unions
- 3. Air carriers
- 4. Creditors Subject to Surface Transportation Board
- 5. Creditors Subject to Packers and Stockyards Act, 1921
- 6. Small Business Investment Companies
- 7. Brokers and Dealers
- 8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations
- 9. Retailers, Finance Companies, and All Other Creditors Not Listed Above

### CONTACT:

- a. Consumer Financial Protection Bureau
   1700 G Street NW
   Washington, DC 20552
- Federal Trade Commission: Consumer Response Center FCRA Washington, DC 20580 (877) 382-4357
- a. Office of the Comptroller of the Currency Customer Assistance Group
   1301 McKinney Street, Suite 3450
   Houston, TX 77010-9050
- Federal Reserve Consumer Help Center P.O. Box 1200
   Minneapolis, MN 55480
- c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106

d. National Credit Union Administration

Office of Consumer Protection (OCP)

Division of Consumer Compliance and Outreach (DCCO)
1775 Duke Street
Alexandria, VA 22314
Asst. General Counsel for Aviation Enforcement & Proceedings
Aviation Consumer Protection Division
Department of Transportation
1200 New Jersey Avenue, SE
Washington, DC 20590
Office of Proceedings, Surface Transportation Board

Office of Proceedings, Surface Transportation Boar Department of Transportation 395 E Street S.W. Washington, DC 20423

Nearest Packers and Stockyards Administration area supervisor

Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416
Securities and Exchange Commission 100 F St NE
Washington, DC 20549
Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090

FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357