



O.V.E.R.T APPLICATION FORM

Last Name _____ First Name _____

Maiden Name _____

Other Name(s) Used _____

Date of Birth : _____

Home Telephone : _____

Business Phone : _____ Extension _____

Cell Phone : _____

Email Address: _____

Street Address _____

Apartment/Unit : _____

City/Town _____

Postal Code _____

Present Employer: _____

Present Occupation _____

Employer's Address: _____

Years in Current Position: _____

Employer's Phone #: _____

Supervisor's Name _____

PLEASE ANSWER THE FOLLOWING:

Have you ever attended an orientation with O.V.E.R.T. in the past? _____ yes _____ no

If yes, list dates: _____

How did you hear about O.V.E.R.T.? _____

Have you ever been a member of O.V.E.R.T. in the past? _____ yes _____ no

If yes, list when and give reason for leaving _____

Are you at least 20 years of age? _____ yes _____ no

Have you supplied a resume? _____ yes _____ no Do you have a criminal record? _____ yes _____ no

Do you have any medical conditions that may affect you in the field? _____ yes _____ no

If yes, than please list: _____

What special talents can you bring to the team? _____

PLEASE ANSWER THE FOLLOWING QUESTIONS BY RANKING YOURSELF FROM (1) LOWEST TO (5) HIGHEST

Your ability to handle stressful situations: ____1____2____3____4____5

Your ability to work with others: ____1____2____3____4____5

Your ability to follow orders: ____1____2____3____4____5

Your ability to withstand the elements (cold, heat, humidity, rain): ____1____2____3____4____5

Your level of physical fitness: ____1____2____3____4____5

Your ability to commit to team training, meetings, call outs (around 80 hours per year):

____1____2____3____4____5

PLEASE INITIAL EACH STATEMENT

____ I acknowledge that any equipment, uniform, or official material issued to me by O.V.E.R.T. Inc., remains the property of the organization, and must be returned upon my resignation.

____ I consent to allow O.V.E.R.T. Inc. to perform a through police records check as part of the selection process

____ I understand that a false statement may disqualify me from membership, or cause my dismissal.

____ I hereby declare that the above information is true and complete to the best of my knowledge.

Signature of Applicant

Date (D/M/Y)

Personnel Only

NB: All applications are kept on file for one year for the purposes of review.

I understand, acknowledge and agree that during this application process, OVERT will be required to collect, use and disclose certain of my personal information. I understand and agree that such personal information includes but is not limited to my home address, phone numbers(s), driver's license number, prior employment history, references, arrest record(s), criminal charge(s), finding(s) of guilt and/or conviction(s), and medical history.

I certify the statements made and information conveyed by me to OVERT during this application process (including but not limited to any statements on this application, on any resumes and during any interviews) are true and correct and I understand that any misstatements may result in the cancellation of the application or dismissal from the team. In this respect, I authorize OVERT to make inquiries concerning personal information unless otherwise requested.

I hereby consent to OVERT, or its agent, prior to deciding whether to accept me on the team, conducting a Criminal Record Check for the purpose of determining my suitability for acceptance to the team. I further understand and agree that OVERT may make decisions with respect to my eligibility for the team or continued participation on the team based on any criminal record for which I have not yet received a pardon, which decisions may include dismissal from the team.

I understand that OVERT is committed to respecting the privacy rights of applicants. I further understand that the team will use appropriate measures to protect the security and privacy of the personal information that it collects, uses and discloses during this application process and during any subsequent period of involvement with the team.

Signed

Date