

TRI-CITY PAVING, INC.
PO BOX 326, Little Falls, Mn 56345

TRUCK DRIVER'S APPLICATION FOR EMPLOYMENT

Tri-City Paving, Inc. is an equal employment opportunity employer and will not discriminate against any applicant or employee on grounds protected under federal, state, or local law, including race, color, creed, religion, age, sex, affectional preference or sexual orientation, national origin, ancestry, marital status, disability, including those related to pregnancy or childbirth, membership or activity in any local commission, status regarding public assistance, familial status, membership or non-membership in any labor organization, or any other characteristic protected under federal, state, or local law. None of the questions in this application are intended to elicit information regarding any protected characteristics.

If you are hired by TRI-CITY PAVING, INC. you will be employed on an at-will basis. As an at-will employee, you may terminate your employment at any time, for any reason, without notice. Similarly, if you are hired, TRI-CITY PAVING, INC. will have the right to terminate your employment at any time, for any reason, without prior notice. No TRI-CITY PAVING, INC. supervisor or manager has the authority to offer or promise anything other than at-will employment, and no subsequent transfer, promotion or change in your employment will affect your at-will employment status.

Answer ALL Questions Completely – Please Print – Be Sure to Complete All Applicable Pages!

Date of application _____

Positions(s) Applied for _____

Name _____ Social Security Number _____
First Middle Last

Current Address _____
Street City
Phone _____ Cell # _____
State Zip Code

Previous Address _____
Street City State & Zip Code

Do you have the legal right to work in the United States? _____

Date of Birth ____/____/____ Can you provide proof of age? _____

(Required for Commercial Drivers)

Have you worked for this company before? _____ Where? _____

Dates: From _____ to _____ Rate of Pay _____ Position _____

Reason for leaving _____

Are you now employed (?) _____ If not, how long since leaving last employment? _____

Who referred you? _____ Rate of pay expected _____

Is there any reason you might be unable to perform the functions of the job for which you have applied (as described in the attached job description)? _____

If yes, explain if you wish. _____

EMPLOYMENT HISTORY

All driver applicants to drive in interstate commerce must provide the following information on all employers during the preceding 3 years. List complete mailing address, street number, city, state and zip code.

Applicants to drive a commercial motor vehicle* in intrastate or interstate commerce shall also provide an additional 7 years' information on those employers for whom the applicant operated such vehicle. (NOTE: List employers in reverse order starting with the most recent. Add another sheet as necessary.)

EMPLOYER			DATE			
NAME	FROM	TO				
	MO	YR	MO	YR		
ADDRESS			Position Held			
CITY	STATE	ZIP	Salary/Wage			
CONTACT PERSON		PHONE NUMBER	Reason for Leaving			
Were you subject to the FMCSRs**while employed? ___ Yes ___ No						
Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? ___ Yes ___ No						

EMPLOYER			DATE			
NAME	FROM	TO				
	MO	YR	MO	YR		
ADDRESS			Position Held			
CITY	STATE	ZIP	Salary/Wage			
CONTACT PERSON		PHONE NUMBER	Reason for Leaving			
Were you subject to the FMCSRs**while employed? ___ Yes ___ No						
Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? ___ Yes ___ No						

EMPLOYER			DATE			
NAME	FROM	TO				
	MO	YR	MO	YR		
ADDRESS			Position Held			
CITY	STATE	ZIP	Salary/Wage			
CONTACT PERSON		PHONE NUMBER	Reason for Leaving			
Were you subject to the FMCSRs**while employed? ___ Yes ___ No						
Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? ___ Yes ___ No						

*Includes vehicles having a GVWR of 26,001 lbs.

**FMCSRs means Federal Motor Carrier Safety Regulations

ACCIDENT RECORD FOR PAST 3 YEARS OR MORE
 (ATTACH SHEET IF MORE SPACE IS NECESSARY) IF NONE, WRITE NONE)

DATES	NATURE OF ACCIDENT (HEAD-ON, REAR-END, ETC.)	FATALITIES	INJURIES
LAST ACCIDENT			
NEXT PREVIOUS			
NEXT PREVIOUS			

TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS
 (OTHER THAN PARKING VIOLATIONS) IF NONE, WRITE NONE

LOCATION	DATE	CHARGE	PENALTY

EDUCATION

CIRCLE HIGHEST GRADE COMPLETED 1 2 3 4 5 6 7 8 HIGH SCHOOL 1 2 3 4 COLLEGE 1 2 3 4
 LAST SCHOOL ATTENDED _____
 (NAME) (CITY)

EXPERIENCE AND QUALIFICATIONS - DRIVER

DRIVERS LICENSES	STATE	LICENSE NUMBER	TYPE	EXPIRATION DATE

DRIVING EXPERIENCE IF NONE, WRITE NONE

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.)	DATES		APPOX. NO. OF MILES (TOTALS)
		FROM	TO	
STRAIGHT TRUCK				
TRACTOR AND SEMI-TRAILER				
TRACTOR-TWO TRAILERS				
MOTOR COACH-SCHOOL BUS				
OTHER				

LIST ALL CURRENT ENDORSEMENTS _____

LIST STATES OPERATED IN FOR LAST FIVE YEARS _____

SHOW SPECIAL COURSES OR TRAINING THAT YOU WILL HELP YOU AS A DRIVER _____

ACKNOWLEDGMENT: PLEASE READ AND SIGN (if you agree)

By my signature below, I promise that the information provided in this employment application (and in any related documentation or interview) is true and complete and I understand that any false or misleading information or significant omissions may disqualify me from employment, if discovered at a later date. I agree to immediately notify TRI-CITY PAVING, INC. if I should be convicted or plead guilty to any crime while my job application is pending, or during my period of employment if hired by TRI-CITY PAVING, INC.

I authorize TRI-CITY PAVING, INC. (the "Employer") to obtain and/or to provide any and all information and opinion which the Employer elects to obtain, use or provide in connection with any application for employment with the Employer, prior, during and after my employment. Such information and opinion may be sought from any and all prior employers (except as noted above) schools or other persons or organizations who may have information the Employer deems relevant in connection with my application for employment, and may be provided by the employer in response to any request for information and opinion concerning my employment or my separation from employment with the Employer, to any and all banks or mortgage companies, governmental agencies, insurers, prospective employers or other schools, persons or organizations deemed appropriate for receipt of such information by the Employer. I understand that the employer may divulge any and all information and opinions, which may include, but are not limited to opinions about my conduct, performance, attendance, or any other aspect of my reputation or character, which may be positive or negative. I agree to hold the Employer (including its principals, employees, agents, consultants, attorneys and insurers) and any such other employer, school, person or organization providing or receiving any such information and opinion, harmless and free of any and all claims or causes of action arising from any such provision or receipt of information and opinion, no matter what its character.

I understand that the information that I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigating my safety performance history as required by 49 CFR 391.23(d) and (e). I understand that I have the right to review information provided by previous employers; have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

I UNDERSTAND THAT THIS APPLICATION DOES NOT CREATE A CONTRACT OF EMPLOYMENT. I UNDERSTAND THAT, IF HIRED, I AM OBLIGED TO COMPLY WITH ANY AND ALL CURRENT AND SUBSEQUENTLY ADOPTED TRI-CITY PAVING, INC. POLICIES, AND THAT TRI-CITY PAVING, INC. DOES NOT OFFER CONTRACTS, PROMISES OR REPRESENTATIONS RELATED TO EMPLOYMENT, I UNDERSTAND AND AGREE THAT, IF HIRED, **MY EMPLOYMENT IS FOR NO DEFINITE PERIOD OF TIME, AND MAY REGARDLESS OF THE DATE OF PAYMENT OF WAGES OR SALARY, BE TERMINATED AT ANY TIME FOR ANY REASON, WITH OR WITHOUT NOTICE.** I UNDERSTAND THAT **NO PERSON IS AUTHORIZED TO CHANGE ANY OF THE TERMS MENTIONED IN THIS EMPLOYMENT APPLICATION.**

This certifies that this application was completed by me and all entries are true and complete to the best of my knowledge.

Applicant's Signature _____ Date _____

AFFIRMATIVE ACTION QUESTIONNAIRE

The purpose of this section is to assist in monitoring Affirmative Action Programs and to aid in complying with any required governmental recordkeeping or reporting requirements.

This information is not part of your employment application and will not be considered in the employment/selection process. The information requested is voluntary, and you will not be subject to any adverse treatment for choosing not to complete the questionnaire.

Name: _____ Date: _____
Last First Middle

Title of job applied for: _____ Referred By: _____

What is your gender?

- Male Female

What is your race/ethnic origin?

- White:** (not of Hispanic origin), a person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Black or African American:** (not of Hispanic origin), a person having origins in any of the Black African racial groups.
- Hispanic or Latino:** a person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture of origin, regardless of race.
- Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent.
- Native Hawaiian or Other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- American Indian or Alaskan Native:** all persons having origins in any of the original peoples of North American and who maintain identifiable tribal affiliations through membership and participation or community recognition.
- Two or More Races.**

Do you have a mental or physical disability? ____ Yes ____ No

Disability is defined as having a physical, sensory, or mental impairment (or condition) that materially (or significantly) limits one or more major life activities; having a record of such impairment; or being regarded as having such an impairment.

What is your Veteran/U.S. Military status?

- (0) Non-Veteran
- (1) Pre-Vietnam Veteran
- (2) Pre-Vietnam Veteran with service incurred disability
- (3) Vietnam Era Veteran (8/5/64 - 5/7/75)
- (4) Vietnam Era Veteran with service incurred disability
- (5) Post Vietnam Veteran
- (6) Post Vietnam Veteran with service incurred disability

INFORMATION ON THIS PAGE WILL NOT BE KEPT IN YOUR PERSONNEL FILE excel

NOTIFICATION OF ALCOHOL & DRUG TEST REQUIREMENT

TRI-CITY PAVING, INC.

IS AN EMPLOYER CONCERNED WITH THE SAFETY OF ITS EMPLOYEES, THE GENERAL PUBLIC AND THE USERS OF THE NATION'S HIGHWAYS.

IF YOU MEET ALL OF THE COMPANY, FEDERAL AND STATE PRE-EMPLOYMENT REQUIREMENTS, AND A JOB OFFER IS MADE WHERE DUTIES INCLUDE OPERATING COMPANY TRUCKS AND/OR BUSES, YOU WILL BE REQUIRED TO TAKE A TEST TO DETERMINE THE PRESENCE OF ILLEGAL DRUGS. THE TESTS ARE CAPABLE OF DETECTING TRACE AMOUNTS OF DRUGS FOR UP TO THIRTY DAYS FOLLOWING USE.

A NEGATIVE ALCOHOL & DRUG TEST REPORT MUST BE RECEIVED IN ORDER TO BE CONSIDERED FOR EMPLOYMENT.

APPLICANT SIGNATURE

DATE