

Commercial Driver Employment Application

Concrete Pump Partners LLC
1309 Brown Street
Nashville, TN 37203

Please Print

AN EQUAL OPPORTUNITY EMPLOYER

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for _____ Date of Application ____/____/____

Referral Source: Advertisement Employee Relative Other _____

Name of Source (if applicable) _____

Per the requirements of the Federal Motor Carrier Safety Regulations (49 CFR 391.21), the following information is required:

Name _____
Last First Middle

Current Address _____ Social Security # _____
Street City ST Zip Code

Prior Address in Last 3 Years _____ Date of Birth ____/____/____
Street City ST Zip Code

Telephone # (____) _____ Mobile Phone / Beeper / Other Phone # (____) _____

May we contact your current employer? Yes No

May we contact you at work? Yes No

If yes, list work number and best time to call (____) _____ AM/PM

Are you legally eligible for employment in the United States? Yes No

Have you ever submitted an application here before? Yes No

If yes, give date(s) and position(s) ____/____/____ _____

Date available for work ____/____/____ Desired Salary/Pay Rate? \$ _____

Type of employment desired: Regular Full Time Part-Time Internship Temporary

Are you willing to relocate if job requires it? Yes No Will you travel if job requires it? Yes No

Our schedules vary daily. Do you have a reliable means of getting to and from work on time? Yes No

Will you work overtime if required? Yes No

Have you ever pled "guilty" or "no contest" to, or have been convicted of a crime? Yes No

If Yes, please provide date(s) and details _____

ANSWERING "YES" TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR FROM EMPLOYMENT. FACTORS SUCH AS THE DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILITATION AND POSTION APPLIED FOR WILL BE TAKEN INTO ACCOUNT.

Employment History

Provide the following information of your past and current employers, assignments, or volunteer activities, starting with the most recent (use additional sheets if necessary). Go Back 10 Years. Do Not Omit Any Positions. Explain any gaps in employment in the section provided.

Current or Most Recent Employer: _____

Start Date: ____/____/____ End Date: ____/____/____ or Still Employed

Employer Address _____

Phone # (____) _____ Starting Wage \$ _____ Ending Wage \$ _____

Supervisor's Name and Title: _____

Starting Job Title: _____ Ending Job Title: _____

Duties: _____

Reason for Leaving: _____

Type of Equipment Driven: _____

May we contact this Employer for reference? Yes No Later

Next Previous Employer: _____

Start Date: ____/____/____ End Date: ____/____/____

Employer Address _____

Phone # (____) _____ Starting Wage \$ _____ Ending Wage \$ _____

Supervisor's Name and Title: _____

Starting Job Title: _____ Ending Job Title: _____

Duties: _____

Reason for Leaving: _____

Type of Equipment Driven: _____

May we contact this Employer for reference? Yes No Later

Employment History (continued)

Next Previous Employer: _____

Start Date: ____/____/____ End Date: ____/____/____

Employer Address _____

Phone # (____) _____ Starting Wage \$ _____ Ending Wage \$ _____

Supervisor's Name and Title: _____

Starting Job Title: _____ Ending Job Title: _____

Duties: _____

Reason for Leaving: _____

Type of Equipment Driven: _____

May we contact this Employer for reference? Yes No Later

Next Previous Employer: _____

Start Date: ____/____/____ End Date: ____/____/____

Employer Address _____

Phone # (____) _____ Starting Wage \$ _____ Ending Wage \$ _____

Supervisor's Name and Title: _____

Starting Job Title: _____ Ending Job Title: _____

Duties: _____

Reason for Leaving: _____

Type of Equipment Driven: _____

May we contact this Employer for reference? Yes No Later

Employment History (continued)

Next Previous Employer: _____

Start Date: ____/____/____ End Date: ____/____/____

Employer Address _____

Phone # (____) _____ Starting Wage \$ _____ Ending Wage \$ _____

Supervisor's Name and Title: _____

Starting Job Title: _____ Ending Job Title: _____

Duties: _____

Reason for Leaving: _____

Type of Equipment Driven: _____

May we contact this Employer for reference? Yes No Later

Next Previous Employer: _____

Start Date: ____/____/____ End Date: ____/____/____

Employer Address _____

Phone # (____) _____ Starting Wage \$ _____ Ending Wage \$ _____

Supervisor's Name and Title: _____

Starting Job Title: _____ Ending Job Title: _____

Duties: _____

Reason for Leaving: _____

Type of Equipment Driven: _____

May we contact this Employer for reference? Yes No Later

Explain any gaps in employment _____

Driving History and Qualifications

List any Driver's License held in the past three years below:

State: _____ License #: _____ Type/Class: _____ Exp. Date: _____

State: _____ License #: _____ Type/Class: _____ Exp. Date: _____

State: _____ License #: _____ Type/Class: _____ Exp. Date: _____

Have you ever been denied a license, permit, or privilege to operate a vehicle? Yes No

Has your license, permit, or privilege ever been suspended or revoked? Yes No

If yes, list dates and explain circumstances _____

Please list your Driving Experience:

<u>Type of Equipment</u>	<u>How Long?</u>	<u>Approximate Miles</u>
Straight Truck	_____	_____
Tractor-Trailer	_____	_____
Tanker	_____	_____
Concrete Mixer	_____	_____
Other _____	_____	_____

List all states you have operated in during the past five years: _____

List any training that you have taken that will help you as a driver: _____

List safe driving awards held and who issued them: _____

Please list all Accidents for the past Three Years: *(Attach a separate sheet of paper if necessary)*

<u>Date</u>	<u>Type of Accident</u>	<u>Location</u>	<u>Fatalities/Injuries</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list all Convictions and Citations for the past Three Years other than parking violations:

<u>Date</u>	<u>Charge/Type</u>	<u>Location</u>	<u>Penalty</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Skills and Qualifications

Indicate training and experience in the following:

Formal Training

Years of Experience

Commercial Driving		
Truck Repair		
Concrete Work		
Construction		
Heavy Equipment		
Management		
Leadership		
Accounting/Budget		
Computers		
Safety		

List any other skills that would be of assistance in determining qualifications for employment:

List any professional, trade, or business associations and any offices held, as well as any special accomplishments, awards, etc. that are relevant:

EXCLUDE MEMBERSHIPS THAT WOULD REVEAL RACE, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP, AGE, MENTAL OR PHYSICAL DISABILITIES, VETERAN/RESERVE/NATIONAL GUARD OR ANY OTHER SIMILARLY PROTECTED STATUS.

Educational Background

SCHOOL	# Of Years Completed	Degree or Diploma	GPA	MAJOR	MINOR

References

List name and telephone number of three work/business references who are NOT related to you.

Name

Telephone

Number of Years Known

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the Employer is true, complete, and correct.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the Employer's service, whenever it is discovered.

I expressly authorize, without reservation, the Employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the Employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the Employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the Employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the Employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the Employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Employer's president or vice-president.

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that I will also be subject to a criminal background check. I also understand that before I will be made an official offer of employment, I must successfully pass a drug screen.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, understand, and fully accept all terms of the foregoing Applicant Statement. I also certify that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I also understand that this application will not be considered complete until I have signed.

Signature of Applicant _____

Date ____/____/____



Pre-Employment Drug Testing Consent and Release Form

I hereby consent to submit to urinalysis and/or other tests as shall be determined by Concrete Pump Partners LLC in the selection process of applicants for employment, for the purpose of determining the drug content thereof.

I agree that any clinic chosen by Concrete Pump Partners LLC, may collect these specimens for these tests and may test them or forward them to a testing laboratory designated by the company for analysis.

I further agree to and hereby authorize the release of the results of said tests to the company.

I further understand that it is the current illegal use of drugs and/or abuse of alcohol that prohibits me from being employed at this Company.

I further agree to hold harmless the Company and its agents (including any clinic chosen by the Company) from any liability arising in whole or part out of the collection of specimens, testing, and use of the information from said testing in connection with the Company's consideration of my employment application.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

Applicant:
Print Name _____ S.S#: _____ - _____ - _____

Applicant:
Signature _____ Date: ____/____/____