



PO Box 555
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Molalla OR 97038

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CDL EMPLOYEE APPLICATION FOR EMPLOYMENT

In compliance with Federal and State equal employment opportunity laws, all qualified applicants will receive consideration for all positions without regard to race, color, religion, gender, national origin, gender identity, disability, age, marital status, protected Veteran status, creed, status with regard to public assistance, sexual orientation, or any other protected group status. We are an equal opportunity employer.

In accordance with FMCSA 391.23: Information provided on this application, including but not limited to employment history, may be used for the purpose of appropriate background check. Your rights regarding investigative information, provided in accordance with FMCSA 391.23(d)&(e) is provided for you on the last page of this application, and is for your keeping.

Please PRINT or TYPE in INK – Answer ALL questions

APPLICANT'S NAME: LAST, FIRST MIDDLE INITIAL		
PRIMARY PHONE:	ALTERNATE PHONE:	EMAIL ADDRESS:
<input type="checkbox"/> CELL <input type="checkbox"/> OTHER	<input type="checkbox"/> CELL <input type="checkbox"/> OTHER	
To drive unrestricted a commercial vehicle you must be a minimum of 21 years of age. Are you of age? <input type="checkbox"/> YES <input type="checkbox"/> NO Birth date:		SOCIAL SECURITY NUMBER:
<small>FMCSA 391.21(b)</small>		<small>FMCSA 391.21(b)</small>

ADDRESS INFORMATION – THREE (3) YEAR HISTORY OF HOME ADDRESS IS REQUIRED

CURRENT ADDRESS: NUMBER, STREET, CITY, STATE, ZIP	How LONG?
ADDRESS: NUMBER, STREET, CITY, STATE, ZIP	How LONG?
ADDRESS: NUMBER, STREET, CITY, STATE, ZIP	How LONG?

How did you learn about us? <input type="checkbox"/> Newspaper <input type="checkbox"/> State Employment Agency <input type="checkbox"/> Social Media (Facebook/Twitter) <input type="checkbox"/> Craigslist <input type="checkbox"/> Drop in <input type="checkbox"/> Company Website <input type="checkbox"/> Company Sign <input type="checkbox"/> School Placement <input type="checkbox"/> Employee:		
Can you prove you have the legal right to work in the United States?..... <input type="checkbox"/> YES <input type="checkbox"/> NO		
Some Saturdays and Overtime will be required. Are you available to work Saturdays and Overtime?..... <input type="checkbox"/> YES <input type="checkbox"/> NO		
Have you ever filed an application with us before?..... <input type="checkbox"/> YES – When: _____ <input type="checkbox"/> NO		
Do any of your friends or relatives work here?..... <input type="checkbox"/> YES – Name: _____ <input type="checkbox"/> NO		
Are you currently employed? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE AVAILABLE TO WORK:	PAY EXPECTED:

EDUCATION – INCLUDE ANY SPECIALIZED TRAINING OR CERTIFICATES

Highest grade completed: HIGH SCHOOL: 4 GED COLLEGE: 1 2 3 4 + TRADE (NOTE BELOW): 1 2 COMPLETED

TYPE OF SCHOOL	NAME AND LOCATION OF SCHOOL	FIELD OF STUDY	NO. OF YEARS	DID YOU GRADUATE?
College/ University				
Trade/ Technical/Certification				

MILITARY - NOT APPLICABLE

BRANCH	DATE FROM	DATE TO

EXPERIENCE AND QUALIFICATIONS - DRIVER, REVIEW OF DRIVING RECORD

Have you ever been denied a license, permit, or privilege to operate a motor vehicle?..... YES NO
 Has any license, permit or privilege even been suspended or revoked?..... YES NO
 Have you ever tested positive, adulterated a sample or refused a drug or alcohol test?..... YES NO
 Have you ever had an alcohol test with a result of 0.04 or above?..... YES NO
 Have you ever been disqualified subject to Federal Motor Carrier Safety Regulations; Section 391..... YES NO

EXPLAIN IF YOU ANSWERED YES TO ANY OF THE ABOVE:

Driver License or permits held in the past 3 years	STATE	LICENSE NO.	TYPE	ENDORSEMENTS	EXPIRATION DATE

COMMERCIAL AND PRIVATE MOTOR VEHICLE ACCIDENT RECORD FOR PAST 3 YEARS OR MORE - NONE

(List most recent first. Attach sheet if more space is needed.)

Date	Nature of Accident (head-on, rear-end, upset, etc.)	Deaths <input type="checkbox"/> Y/ <input type="checkbox"/> N	Injuries <input type="checkbox"/> Y/ <input type="checkbox"/> N	Hazardous Material Spill <input type="checkbox"/> Y/ <input type="checkbox"/> N	Preventable <input type="checkbox"/> Y/ <input type="checkbox"/> N	At Fault <input type="checkbox"/> Y/ <input type="checkbox"/> N
		<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N
		<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N
		<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N	<input type="checkbox"/> Y/ <input type="checkbox"/> N

TRAFFIC CONVICTIONS, VIOLATIONS, AND FORFEITURES FOR THE PAST THREE (3) YEARS - NONE

(List most recent first. Do not list parking violations. Attach sheet if more space is needed.)

Location	Date	Charge	Penalty

DRIVING EXPERIENCE – INDICATE YES OR NO

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLAT, DUMP, REFER)	DATE		APPROX. TIME TOTAL
		FROM	TO	
Straight Truck <input type="checkbox"/> Yes <input type="checkbox"/> No				
Tractor Trailer & Semi Trailer <input type="checkbox"/> Yes <input type="checkbox"/> No				
Tractor – Two Trailer <input type="checkbox"/> Yes <input type="checkbox"/> No				
Tractor – Three Trailer <input type="checkbox"/> Yes <input type="checkbox"/> No				
Motor Coach – School Bus (8+ Pass.) <input type="checkbox"/> Yes <input type="checkbox"/> No				
Motor Coach – School Bus (15+ Pass.) <input type="checkbox"/> Yes <input type="checkbox"/> No				
Ready Mix Truck <input type="checkbox"/> Yes <input type="checkbox"/> No				
Other-Identify:				

EMPLOYMENT HISTORY – LIST MOST CURRENT FIRST

All individuals applying to drive a commercial motor vehicle* intrastate commerce must provide the following information on all employers during the preceding 3 years, 10 years for interstate driving. **LIST COMPLETE MAILING ADDRESS, STREET NUMBER, CITY, STATE, AND ZIP CODE. PLEASE USE ADDITIONAL PAPER IF MORE SPACE IS NEEDED. A RESUME MAY BE INCLUDED WITH THIS APPLICATION, BUT WILL NOT BE ACCEPTED IN LIEU OF COMPETITION OF THIS APPLICATION.**

EMPLOYER		PHONE		MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS			JOB TITLE	
DATE EMPLOYED	TO	REASON FOR LEAVING		SUPERVISOR
WHERE YOU SUBJECT TO THE FMCSR'S [†] WHILE EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF YES, WAS YOUR JOB DESIGNATED AS A SAFETY-SENSITIVE FUNCTION - SUBJECT TO THE DRUG & ALCOHOL TESTING REQUIREMENTS OF 49CFR PART 40? <input type="checkbox"/> YES <input type="checkbox"/> NO				
EMPLOYER		PHONE		MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS			JOB TITLE	
DATE EMPLOYED	TO	REASON FOR LEAVING		SUPERVISOR
WHERE YOU SUBJECT TO THE FMCSR'S [†] WHILE EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF YES, WAS YOUR JOB DESIGNATED AS A SAFETY-SENSITIVE FUNCTION - SUBJECT TO THE DRUG & ALCOHOL TESTING REQUIREMENTS OF 49CFR PART 40? <input type="checkbox"/> YES <input type="checkbox"/> NO				
EMPLOYER		PHONE		MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS			JOB TITLE	
DATE EMPLOYED	TO	REASON FOR LEAVING		SUPERVISOR
WHERE YOU SUBJECT TO THE FMCSR'S [†] WHILE EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF YES, WAS YOUR JOB DESIGNATED AS A SAFETY-SENSITIVE FUNCTION - SUBJECT TO THE DRUG & ALCOHOL TESTING REQUIREMENTS OF 49CFR PART 40? <input type="checkbox"/> YES <input type="checkbox"/> NO				
EMPLOYER		PHONE		MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS			JOB TITLE	
DATE EMPLOYED	TO	REASON FOR LEAVING		SUPERVISOR
WHERE YOU SUBJECT TO THE FMCSR'S [†] WHILE EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF YES, WAS YOUR JOB DESIGNATED AS A SAFETY-SENSITIVE FUNCTION - SUBJECT TO THE DRUG & ALCOHOL TESTING REQUIREMENTS OF 49CFR PART 40? <input type="checkbox"/> YES <input type="checkbox"/> NO				
EMPLOYER		PHONE		MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS			JOB TITLE	
DATE EMPLOYED	TO	REASON FOR LEAVING		SUPERVISOR
WHERE YOU SUBJECT TO THE FMCSR'S [†] WHILE EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF YES, WAS YOUR JOB DESIGNATED AS A SAFETY-SENSITIVE FUNCTION - SUBJECT TO THE DRUG & ALCOHOL TESTING REQUIREMENTS OF 49CFR PART 40? <input type="checkbox"/> YES <input type="checkbox"/> NO				

*Includes vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 16 or more passengers (including driver), or any size vehicle used to transport hazardous materials in quantity requiring placarding.

[†]The Federal Motor Carrier Safety Regulations (FMCSR's) apply to anyone operating a motor vehicle on a highway in interstate commerce to transport passengers or property when the vehicle (1) weighs or has a GVRW of 10,001lbs or more, (2) is designed or used to transport 8 (including driver), or more passenger, OR (3) is of any size and is used to transport hazardous materials in a quantity requiring placarding.

**APPLICATIONS WILL NOT BE CONSIDERED WITHOUT
COMPLETE ACKNOWLEDGEMENT, INITIALS, AND/OR SIGNATURES AS REQUIRED ON THE FOLLOWING SECTIONS**

PREVIOUS PRE-EMPLOYMENT EMPLOYEE DRUG AND ALCOHOL TEST STATEMENT

Sec. 40.25(j) As the employer, you must also ask the employee whether he or she has tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which employee applied for but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years. If the employees admit that he or she had a positive test or refusal to test, you must not use the employee to perform safety-sensitive functions for you, until and unless the employee documents successful completion of the return-to-duty process. (See Sec. 40.25(b)(5) and (e))
NOTICE TO PROSPECTIVE EMPLOYEE: You are required by Sec. 40.25(j) to respond to the below questions. If yes is answered to either question, before being employed in any safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules, you must provide documents of successful completion of the return-to-duty process. (See Sec. 40.25(b)(5) and (e))

Have you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years?
..... YES NO
If you have answered yes, can you provide/obtain proof that you've successfully completed the DOT return-to-duty requirements?
..... YES NO

JOB DESCRIPTION

The purpose of this job description is to establish and define the authority, accountability, reporting relationships, responsibilities, duties, and measures of performance of a Ready Mix Truck Driver of Molalla Redi-Mix & Rock Products, Inc.

BASIC FUNCTION: The basic function of a driver is to deliver concrete and materials to customer sites as close to the allotted time schedule as possible with excellent quality and service and to maintain his/her assigned vehicle in accordance with the company maintenance plan.

REPORTING RELATIONSHIP: The driver is supervised and reports directly to the dispatch operator.

JOB REQUIREMENTS: To perform this job successfully, an individual must be able to complete all areas outlined for this position in a satisfactory manner. Listed below are representative of the knowledge, skills, and/or abilities necessary to meet minimum job requirements. Reasonable accommodation may be made to enable individuals with disabilities to perform the essential functions.

- 1) **Education:** Preferred High School diploma or equivalent
- 2) **Licensing/Registrations/Certifications:** Required: Current, valid Commercial Driver's License (CDL) Class B for ready mix drivers, Class A for doubles trailers, medical certification and any other licenses as required by Federal, State, and Local Law.
- 3) **Experience:** Required: 1 ½ years prior experience as a commercial driver. Preferred: 1 ½ or more years experience as a as a commercial driver of a ready mix concrete truck.

- SKILLS, KNOWLEDGE, AND ABILITIES:**
- Provide prompt, dependable, high quality service to (internal and external) customers.
 - Complete delivers within the scheduled or allotted time period whenever possible. Continually improving "efficiency skills".
 - Complete the assigned batch plant operations in a timely manner.
 - Maintain productivity as close to 100% as possible.
 - Accept delivery and other work assignments from the Dispatcher or other supervisors.
 - Maintains assigned vehicle per the maintenance plan. Effects repairs when called upon. Notifies Dispatcher immediately if repairs are needed beyond the driver's capabilities.
 - Operates assigned vehicle safely and in accordance with National, State, and Local regulations.
 - Assist the service writer or Dispatcher, when requested, with writing up work orders, communications with customers, or any other issues which will help ensure customer satisfaction.
 - Notify the dispatcher of additional work needed, correction of driving directions, or any delay in expected completion of assigned delivery.
 - Notify the other drivers of details pertaining to jobs to help them better serve the customer, such as slump needed, backing into jobs, standing by offsite, corrections to driving directions and other details as necessary.
 - After job completion ensure completion of proper paperwork and payment.
 - Keep vehicle clean inside and outside and assist others in maintain shop, yard, and precast area cleanliness.
 - Assist yard and shop personnel as needed to insure effective operations.
 - Maintain technical qualifications by completing any necessary programs assigned to you by the Dispatcher or other Supervisor.
 - Following items pertaining to the Company Employee Handbook in relation to your job.
 - Other duties as assigned by the Dispatcher or other Supervisor.

JOB DESCRIPTION, CONT

PHYSICAL: The physical demands described here are representative of those that must be met by the employee to successfully perform the essential function of this job.

- **BODY POSITIONS:** While performing the duties of this job, the employee is regularly required to stand, bend, stoop, turn the head and torso, climb on ladders and equipment and reach repetitively.
- **BODY MOVEMENTS:** The employee must have full range of body movements including use of hands to finger, handle, or feel objects, computer equipment and peripherals; and bending, reaching, and crouching.
- **BODY SENSES:** Must have command of all five senses, sight, hearing, touch, smell and taste. Specific vision abilities required including close vision, depth perception, and ability to adjust focus. These vision requirements in each area must be sufficient to shift in focus from computer screen to close forms.
- **STRENGTH:** Must have the ability to lift 50lbs with regularity.

WORKING CONDITIONS: This position will be working primarily outdoors in the company vehicle at customer locations, the company site and roadways in between. From this movement, the employee will encounter varying temperature and weather. The noise level in the work environment is usually moderate by can be higher for short periods of time. This position works near moving mechanical parts, is exposed to electrical circuits.

AUTHORITY: The driver is authorized to take any reasonable action necessary to carry out the responsibilities assigned so long as such action is safe, does not deviate from established corporate policy and is consistent with sound business judgment. Driver is authorized to stop any unsafe act.

DUTIES AND RESPONSIBILITIES: The duties and responsibilities of the driver include, but are not limited to:

- Performance of the services as outlined in Skills, Knowledge, and Abilities above.
- Provide quality and fair service to customers.
- Other duties/responsibilities that may be assigned by the Dispatcher from time to time.

STANDARDS OF PERFORMANCE: The driver shall be deemed to be performance in an acceptable manner when the following:

- The timely completion of assignments.
- Preparation of the required paperwork and resulting payment involved in service.
- Operating safely
- Attending the required training
- Cooperating with others for the achievement of departmental goals and objectives.

ACKNOWLEDGMENT: I have reviewed and understand the prior job description and believe it to be accurate and complete, and I can successfully fulfill each duty or task. I also agree that management retain the right to change this job description at any time. **Initials:**

AFFIDAVIT

- I certify that, to the best of my knowledge, the information contained in this application is true and complete. I understand that my employment may be denied or terminated if I provide false, misleading, or incomplete information during the hiring process including on this application, during my interview, on hiring documents, or during my period of employment.
- I understand that if a job offer is made by the company I will be required and agree to submit to a post-offer, pre-employment drug screening and I understand that my employment is conditional upon a satisfactory report from the drug screening. I understand that I may be required and agree to participate in and pass a post-offer, pre-employment physical examination as conditions of my employment.
- I understand that if a job offer is made by the company I must produce applicable documents showing that I am lawfully authorized to work in the United States, that I have the federally required licensing to operate a commercial vehicle, and that I have participated in and passed the federally required medical exam by a qualified examiner found on the National Registry.
- By signing I authorize the company to make an investigation and inquires into my prior employers, educational institutions, and other references personal and employment related listed on this application for the purpose of arriving at an employment decision. I release liability from and give authorization to these before listed parties, and include the Company, to release information regarding my employment, academic records, character, and qualifications.
- Upon a conditional offer of employment, I authorize the Company to conduct an employment background check that can include such things as name verification, social security verification, education verification, motor vehicle record, employment verification.
- I authorize said companies to release information from my DOT regulated drug and alcohol testing record. I authorize release of alcohol test, positive drug test, refusal to test, other violations of DOT agency regulations, documentation of completion of the return-to-duty following a rule violation, and other information obtained from previous employer of a drug and alcohol rule violation.
- I understand that the information I have provided on this application regarding my current and/or previous employers may be used and those employer(s) will be contacted, for the purpose of investigation my safety performance history as required by FMCSA 391.23(d)&(e).

AFFIDAVIT, CONT

- I understand that I have the right to review information provided by current/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 accuracy of the information.
- I agree to conform to all Company policies, rules and procedures including but not limited to the Company's handbook and any updates made to it. I know that I have full access to the handbook at any time and may request a copy to review prior to signing this affidavit. I understand that by signing this affidavit, whether I have read the handbook or not, I will be held accountable to follow and agree to the handbook policies, rules, and procedures, including updates, upon a conditional employment offer and thereafter until such time of termination.
- I understand and agree that nothing contained in this application or in granting of an interview creates a contract between the Company and me for employment or for any other benefit. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon the Company.
- I understand that Oregon is an "at will" state. If I am offered employment, such employment is for no definite period of time and that the Company can change wage, benefits, and employment conditions at any time. In turn, I as the employee may resign at any time with or without cause as can the Company, as employer, may discharge me at anytime with or without cause.
- I understand that this application shall be considered active and current for a period of 60 days from date of submittal. I understand that if I wish to be considered for employment beyond that period I will have to resubmit a current and complete application.

This signature certifies 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 have read, acknowledge, initialed, signed and understand the information contained within this application, including but not limited to the previous pre-employment employee drug and alcohol test statement, the job description, and affidavit.

APPLICANT'S SIGNATURE:

DATE: