



READY MIX CONCRETE CO. LLC
4010 19th ST NW Rochester, MN 55901
COMMERCIAL DRIVER APPLICATION

APPLICANT INFORMATION

LAST NAME _____ FIRST NAME _____ MI ____
APPLICATION DATE _____ POSITION APPLYING FOR _____
PHONE (____) _____ EMERGENCY PHONE (____) _____
COMMERCIAL DRIVERS LIC # _____ STATE ____ EXP. ____
EMAIL _____ DATE OF BIRTH _____ SS# _____
MEDICAL / PHYSICAL EXAM EXPIRATION DATE _____
CURRENT & PREVIOUS THREE YEARS ADDRESSES:

_____ FROM _____ TO _____
_____ FROM _____ TO _____
_____ FROM _____ TO _____

HAVE YOU WORKED FOR READY MIX CONCRETE COMPANY BEFORE? ____ Yes ____ No
If yes, give dates: From _____ To _____ Reason for leaving? _____

EDUCATION HISTORY:

Circle the highest grade completed:
Grade School: 1 2 3 4 5 6 7 8 9 10 11 12 College: 1 2 3 4 Certificates _____
Other skills or training: _____

EMPLOYMENT HISTORY:

Give a **COMPLETE REPORT** of all employment for the past (3) years, including self-employment periods, and commercial driving experiences for the past (10) years

Current or Previous Employer _____

Employment Status: Currently Employed ____ Previous ____ From ____ To ____

Contact Individual _____ May we contact? Yes / No

Position Held _____ Phone (____) _____

Address _____

Reason for leaving _____ Phone (____) _____

Were you subject to the FMCSRs while employed here? ____ 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

Previous Employer _____

Employed From: _____ To: _____

Contact Individual _____ May we contact? Yes / No

Position Held _____ Phone (____) _____

Address _____

Reason for leaving _____ Phone (____) _____

Were you subject to the FMCSRs while employed here? _____ 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

Previous Employer _____

Employed From: _____ To: _____

Contact Individual _____ May we contact? Yes / No

Position Held _____ Phone (____) _____

Address _____

Reason for leaving _____ Phone (____) _____

Were you subject to the FMCSRs while employed here? _____ 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

Previous Employer _____

Employed From: _____ To: _____

Contact Individual _____ May we contact? Yes / No

Position Held _____ Phone (____) _____

Address _____

Reason for leaving _____ Phone (____) _____

Were you subject to the FMCSRs while employed here? _____ 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

*** List other previous employers on a separate page if necessary.

Have you ever 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 Yes, have you successfully completed the return – to – duty process? ___ Yes ___ No

Do you have documentation of completing the return –to –duty process? ___ Yes ___ No

DRIVING EXPERIENCE

Class of Equipment	From	To	Approximate Number of Hours / Miles
Straight Truck			
Farm Truck			
Farm Equipment			
Construction Equipment			
Tractor & Trailer			

List states operated in in the last (5) years: _____

Accident Record for past five (5) years:

Date of Accident	Nature of Accident(s)	Location of Accident	What were your Charges

Traffic Convictions and Forfeitures for the last five (5) years (other than parking violations)

Date	Location		Charged With	Penalty

Driver’s License held in the past five (5) years

State	License #	Class	Type	Endorsements	Expiration

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

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

Do you authorize Ready Mix Concrete Company LLC to check your driving records in all states, if Yes sign here: _____ Date: _____

Is there any reason for which you may be unable to perform the functions of the job for which you have applied for such as lifting 45 lbs., climbing ladder, safe control of the vehicle, working in extreme heat and cold weather? _____ Yes _____ No

Have you ever been convicted of a felony? _____ Yes _____ No

If the answer to any questions listed above is YES, give details _____

References

List three (3) persons for references, other than family members, who have knowledge of your abilities to perform this job and your safety habits:

Name _____ Email Address _____ Phone _____

Name _____ Email Address _____ Phone _____

Name _____ Email Address _____ Phone _____

To Be Read and Signed by Applicant:

It is agreed and understood that any misrepresentation given on this application shall be considered an act of dishonesty. It is agreed and understood that Ready Mix Concrete LLC may investigate the applicant's background to obtain any and all information of concern to applicant's record and may include information regarding my character, general reputation, personal characteristics, business and financial dealings. The applicant releases employers and persons named herein from all liability for any damages on account of furnishing such information.

It is agreed and understood that this Application in no way obligates Ready Mix Company LLC to employ or hire the applicant.

It is agreed and understood that if qualified and hired, I will be on a probationary period for one calendar year, during which time I may be disqualified without recourse.

It is agreed and understood that I will annually disclose, in writing and with full disclosure, any and all new and existing violations existing on my Commercial Driver's License (CDL).

This 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.

As terms of my potential employment, I will submit the following documents prior to receiving a final offer of employment:

- *Valid and current MN CDL,*
- *current Medical Examiners card along with copy of Medical Examiners long form, and*
- *documents to prove eligibility to be hired in United States of America.*

Applicant Signature _____ **Date** _____

(For office use only)

I have received and reviewed this application, driving record and the evidence provided by the applicant.

_____ **Official Representative for Ready Mix CO L.L.C.**

Date of Hire: _____

Estimated date of End of Probation: _____