

FRED HILL MATERIALS

(Select location(s) desired below)

Poulsbo

Port Orchard/Bremerton

Port Townsend

Sequim

DRIVER APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer

- ◆ A drug urinalysis, testing for the use of illegal drugs and done at the Company's expense, is a condition of employment and I agree to such a test.
- ◆ This application will be considered for the specific job applied for. It will not be considered active after 6 months. If you desire to be considered for a position at a future time you must file a new application.

Date of Application: _____

PERSONAL INFORMATION

Name: _____
First Middle Last

Home Phone: () _____ Other Phone: () _____

List your addresses of residency for the past 3 years.

Current Address: _____
Street City State Zip Code

Former Address: _____
Street City State Zip Code

Former Address: _____
Street City State Zip Code

Do you have the legal right to work in the United States? Yes No

POSITION APPLYING FOR

Position Applying For: _____ Temporary Part-time Full-time

Date available for work _____ Rate of pay expected? _____

Ever applied to this company before? _____ When _____

Ever worked for this company before? _____ Dates _____ Position _____

Reason for leaving _____

Names of relatives employed by this Company? _____

Who referred you? _____

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

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)

EMPLOYMENT HISTORY

The U.S. Department of Transportation requires that driver applicants show all employment for the past three years. Applicants driving a commercial motor vehicle must also show commercial driver employment for the seven years immediately preceding the three year period.

Start with current or last employer, including military experience and work back (Attach a separate sheet if necessary)

May we contact your present employer Yes No

EMPLOYER			DATE			
NAME	FROM MO.	YR.	TO MO.	YR.		
ADDRESS			POSITION			
CITY	STATE	ZIP	SALARY/WAGE			
SUPERVISOR		PHONE NUMBER		REASON FOR LEAVING		

EMPLOYER			DATE			
NAME	FROM MO.	YR.	TO MO.	YR.		
ADDRESS			POSITION			
CITY	STATE	ZIP	SALARY/WAGE			
SUPERVISOR		PHONE NUMBER		REASON FOR LEAVING		

EMPLOYER			DATE			
NAME	FROM MO.	YR.	TO MO.	YR.		
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ADDRESS			POSITION			
CITY	STATE	ZIP	SALARY/WAGE			
SUPERVISOR		PHONE NUMBER		REASON FOR LEAVING		

DRIVER EXPERIENCE & QUALIFICATION

LICENSES

Driver Licenses held in past 3 years must be shown	State	License No.	Class	Endorsements	Expiration Date

- Have you ever 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
- Have you ever been disqualified for violations of the Federal Motor Carrier Safety Regulations? Yes No

If you answered yes to the above questions, attach statement giving details.

DRIVING EXPERIENCE (If none, write none)

Class of Equipment	Type of Equipment (Van, Tank, Flat, etc.)	Dates		Approximate Total Miles
		From	To	
Tractor/Semi-Trailer				
Tractor/Doubles				
Dump Truck				
Mixer Truck				
Other				

List states operated in during last five years _____

List special courses or training that will help you as a driver _____

List any safe driving award you have received and from whom _____

ACCIDENTS/VIOLATIONS: List below all accidents you have been involved in during the past 3 years and all traffic violations (other than parking) that you have been convicted of or forfeited bond for during the past 3 years. If none, write none. (Attach separate sheet of paper if more space is needed)

Date	Offense/Accident	Description	Injuries/Fatalities	Location	Type of Vehicle Operated

EXPERIENCE AND QUALIFICATIONS – OTHER

Show any trucking, transportation or other experience that may help in your work for this company _____

List special equipment or technical materials you can work with (other than those already shown) _____

If you also wish to be considered for employment with our other company, Kitsap Ready Mix, please check the following box.

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION
PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Fred Hill Materials that such employment with Fred Hill Materials is at will, for no specified duration and may be terminated by either Fred Hill Materials or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions or statements of Fred Hill Materials or its representatives during the employment process is deemed a contract of employment real or implied. I understand that no representative of Fred Hill Materials except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of Fred Hill Materials.

In consideration for employment with Fred Hill Materials, if employed, I agree to conform to the rules, regulations, policies and procedures of Fred Hill Materials at all times and understand that such obedience is a condition of employment. I understand that due to the nature of Fred Hill Materials business, attendance and punctuality are considered essential requirements of every job at Fred Hill Materials and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with Fred Hill Materials, I may be required to submit to a pre-employment drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Fred Hill Materials and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for six months. If I wish to be considered for employment after this period I must fill out and submit a new application.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREED TO THE ABOVE STATEMENTS.

Signature

Date

*FRED HILL MATERIALS, INC. IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER.
ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER,
NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.*

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