

ECHCO CONCRETE LLC
1824 Brooks Road, Corning, IA 50841

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, sexual orientation, or any other legally protected status.
Pre-employment drug testing is required.

(PLEASE PRINT)

Position(s) Applying For:	Date of Application:	
How Did You Learn About Us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name	
Address	City	State	Zip
Email Address:			
Telephone Number / Cell Number		Driver License Number	

- Are you at least 18 years of age ? Yes No
- Have you ever filed an application with us before? Yes No
- If Yes, give date: _____
- Have you ever been employed with us before? Yes No
- If Yes give date: _____
- Did you quit or were you fired? _____
- Reason: _____
- Who was your Previous Foreman? _____
- Are you currently employed? Yes No
- May we contact your present employer? Yes No
- Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No
- Proof of citizenship or immigration status will be required upon employment.*

On what date are you available for work: _____

Are you available to work: ___ Full Time ___ Temporary

Please Explain: _____

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, Please Explain: _____

Are you afraid of heights? Yes No

Will you be able to perform the essential functions of the position you have applied for? Yes No

If No, what accommodation would make it possible for you to do this job? _____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer	<u>Dates Employed</u> From To		Work Performed
Address			
Telephone Number	<u>Hourly Rate / Salary</u> From To		
Job Title	Supervisor		
Reason for Leaving			

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Describe any specialized training, apprenticeship, skill, with experience in concrete, steel erection, asphalt labor & equipment operation.

Accident record for past 3 years or more (attach sheet if more space is needed)

	Dates	Nature of Accident (Head-On, rear-end, upset, etc.)	Fatalities	Injuries
Last Accident				
Next Previous				
Next Previous				

Traffic convictions and forfeitures for the past 3 years (other than parking violations)

Location	Date	Charge	Penalty

(attach sheet if more space needed)

EDUCATION - Optional

Circle Highest Grade Completed: 1 2 3 4 5 6 7 8 High School: 9 10 11 12 College: 1 2 3 4

Last School Attended: _____

EXPERIENCE AND QUALIFICATIONS - Driver

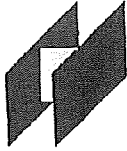
Driver Licenses	State	License No.	Type	Expiration Date

- A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No
- B. Has any license, permit, or privilege ever been suspended or revoked? Yes No

IF THE ANSWER TO EITHER A OR B IS YES, ATTACH STATEMENT GIVING DETAILS

DRIVING EXPERIENCE

Class of Equipment	Type of Equipment (Van, Tank, Flat, Etc.)	Dates		Approx. No. of Miles (Total)
		From	To	
Straight Truck				
Tractor and Semi-Truck				
Tractor-Two Trailors				
Other				



HENNINGSEN
 CONSTRUCTION, INC.
 1407 SW 7th Street
 Atlantic, IA, 50022

TRUCKDRIVERS ONLY
"FORMER EMPLOYEE VERIFICATION"

HENNINGSEN CONST. INC AND ECHCO CONCRETE LLC.

SECTION 1: PREVIOUS EMPLOYEE INFORMATION AND RELEASE

NAME: _____ SOCIAL SEC # _____

I hereby authorize _____ to release the following requested information to HENNINGSEN CONST./ECHCO CONCRETE for the purposes of investigation and qualifying me to drive a commercial motor vehicle as required by the U.S. Dept. of Transportation. You are hereby released from any and all liability that may result from furnishing such information. **YOUR QUICK RESPONSE TO THIS REQUEST WILL BE GREATLY APPRECIATED.**

SIGNATURE _____ DATE _____

SECTION 2: PREVIOUS EMPLOYEE WORK HISTORY

Employed from _____ to _____ as a _____

Did previous employee drive a motor vehicle for you? Yes No

Car Tractor-Semitrailer Straight Truck Bus Other

Was previous employee a safe and efficient driver? Yes No

Give the dates of vehicle accidents in which employee was involved. _____

Reason for leaving your employ. Discharged Laid Off Resigned Other

Was the employees general conduct satisfactory? Yes No

Is previous employee eligible for rehire at your company? Yes No

SECTION 3: NOTE – Regulations of the Federal Highway Administration (49 C.F.R. 382) requires your company to provide us with information concerning the named driver's past drug and alcohol test results. Including refusals to be tested.

IN THE PAST TWO YEARS HAS THE PREVIOUSLY NAMED APPLICANT EVER:

*Tested positive for a controlled substance? Yes No

*Tested with an alcohol concentration of 0.04 or higher? Yes No

*Refused to submit to a DOT required drug and/or alcohol test? Yes No

Your Name: _____ Title _____

Signature _____ Date _____

PLEASE FORWARD RESPONSE AS INDICATED AS SOON AS POSSIBLE TO:
Henningesen Const., Inc. Attn: Barb Meneely – Safety/HR Dept.
1407 SW 7th Street, Atlantic IA 50022 Fax: 712-243-6521 Thank you!

MANDATORY USE FOR ALL ACCOUNT HOLDERS

**IMPORTANT NOTICE
REGARDING BACKGROUND REPORTS FROM THE PSP Online Service**

1. In connection with your application for employment with Echco Concrete, L.L.C. ("Prospective Employer"), Prospective Employer, its employees, agents or contractors may obtain one or more reports regarding your driving, and safety inspection history from the Federal Motor Carrier Safety Administration (FMCSA).

When the application for employment is submitted in person, if the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer will provide you with a copy of the report upon which its decision was based and a written summary of your rights under the Fair Credit Reporting Act before taking any final adverse action. If any final adverse action is taken against you based upon your driving history or safety report, the Prospective Employer will notify you that the action has been taken and that the action was based in part or in whole on this report.

When the application for employment is submitted by mail, telephone, computer, or other similar means, if the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer must provide you within three business days of taking adverse action oral, written or electronic notification: that adverse action has been taken based in whole or in part on information obtained from FMCSA; the name, address, and the toll free telephone number of FMCSA; that the FMCSA did not make the decision to take the adverse action and is unable to provide you the specific reasons why the adverse action was taken; and that you may, upon providing proper identification, request a free copy of the report and may dispute with the FMCSA the accuracy or completeness of any information or report. If you request a copy of a driver record from the Prospective Employer who procured the report, then, within 3 business days of receiving your request, together with proper identification, the Prospective Employer must send or provide to you a copy of your report and a summary of your rights under the Fair Credit Reporting Act.

The Prospective Employer cannot obtain background reports from FMCSA unless you consent in writing.

If you agree that the Prospective Employer may obtain such background reports, please read the following and sign below:

2. I authorize Echco Concrete, L.L.C. ("Prospective Employer") to access the FMCSA Pre-Employment Screening Program (PSP) system to seek information regarding my commercial driving safety record and information regarding my safety inspection history. I understand that I am consenting to the release of safety performance information including crash data from the previous five (5) years and inspection history from the previous three (3) years. I understand and acknowledge that this release of information may assist the Prospective Employer to make a determination regarding my suitability as an employee.

3. I further understand that neither the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. I understand I may challenge the accuracy of the data by submitting a request to <https://dataqs.fmcsa.dot.gov>. If I am challenging crash or inspection information reported by a State, FMCSA cannot change or correct this data. I understand my request will be forwarded by the DataQs system to the appropriate State for adjudication.

4. Please note: Any crash or inspection in which you were involved will display on your PSP report. Since the PSP report does not report, or assign, or imply fault, it will include all Commercial Motor Vehicle (CMV) crashes where you were a driver or co-driver and where those crashes were reported to FMCSA, regardless of fault. Similarly, all inspections, with or without violations, appear on the PSP report. State citations associated with FMCSR violations that have been adjudicated by a court of law will also appear, and remain, on a PSP report.

I have read the above Notice Regarding Background Reports provided to me by Prospective Employer and I understand that if I sign this consent form, Prospective Employer may obtain a report of my crash and inspection history. I hereby authorize Prospective Employer and its employees, authorized agents, and/or affiliates to obtain the information authorized above.

Date: _____

Signature

Name (Please Print)

NOTICE: This form is made available to monthly account holders by NICT on behalf of the U.S. Department of Transportation, Federal Motor Carrier Safety Administration (FMCSA). Account holders are required by federal law to obtain an Applicant's written or electronic consent prior to accessing the Applicant's PSP report. Further, account holders are required by FMCSA to use the language provided in paragraphs 1-4 of this document to obtain a prospective Applicant's consent. The language must be used in whole, exactly as provided. The language may be included with other consent forms or language at the discretion of the account holder, provided the four paragraphs remain intact and the language is unchanged.

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***Motor Vehicle
Driver's Certification of Violations***

Please list any motor vehicle violations you have had in the past 12 months. It is company policy that we order a Motor Vehicle Report for all employees. I hereby authorize Echco Concrete, L.L.C. to get this information regarding my driving record.

I certify that the following is a true and complete list of traffic violations for which I have been convicted or forfeited bond or collateral during the past 12 months.

Date	Offense	Location	Type of Vehicle Operated
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

Employee Signature

Date

Reviewed by Signature

Date