

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

APPLICANT INFORMATION

NAME _____

DATE _____ Position applying for: _____

PHONE (____) _____ EMERGENCY PHONE (____) _____

EMAIL ADDRESS _____

DATE OF BIRTH _____ SS# _____

PHYSICAL EXAM EXPIRATION DATE _____

CURRENT & PREVIOUS THREE YEARS ADDRESSES:

_____ FROM _____ TO _____

_____ FROM _____ TO _____

_____ FROM _____ TO _____

HAVE YOU WORKED FOR THIS 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: _____

EMPLOYEMENT HISTORY:

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

Current or previous Employer _____

Employment Status: Currently Employed _____ *Previous* _____ *From* _____ *To* _____

Contact Individual _____ *May we contact now? 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 _____

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

Contact Individual _____ May we contact now? 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 _____

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

Contact Individual _____ May we contact now? 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 _____

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

Contact Individual _____ May we contact now? 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	Charge	Penalty

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

State	License	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 L.L.C. 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 L.L.C. 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, and 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 Rochester Ready Mix Company
L.L.C. to employ or hire the applicant.*

*It is agreed and understood that if qualified and hired, I will be on a probationary period for ninety (90)
working days during which time I may be disqualified without recourse.*

*It is agreed and understood that I will annually disclose in writing with full disclosure regarding 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.*

*I will include the following documents as well as other documents with my completed application:
Valid and current MN CDL, Current Medical examiners card along with copy of Medical Examiners
long form, 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: _____