

(PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS)

Our Company fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, disability, or any other basis prohibited by federal, state or local law. In accordance with requirements of the Americans With Disabilities Act, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As Equal Opportunity Employers, we intend to comply fully with applicable federal and State employment laws and the information requested on this application will only be used for purposes consistent with those laws. Applications are only accepted for positions currently available and will only be considered for thirty (30) days from today's date or until the position applied for is filled, whichever first occurs.

COMPANY NAME:

Hermann Sand And Gravel, Inc. P.O. Box 261 Hermann, Mo 65041

POSITION APPLIED FOR:

Deckhand, Mate, Engineer, Captain/Mate Circle One

DATE:

PERSONAL DATA:

Salary expectations: _____

Last Name	First	Middle
Street Address	City	State/Zip Code
		Telephone Number

If you are under 18 years of age, please specify your age here _____. This information will be used only for child labor law purposes.

Are there any days, shifts or hours you will not work? _____ If yes, please explain: _____

Are you available for out of town work? _____ Will you work overtime, if required? _____

When will you be able to start work? _____

Have you taken any illegal drugs in the last 30 days? _____

Have you ever been a defendant in a civil action for an intentional tort (intentional commission of a wrongful act)? Yes ☐ No ☐

Note: Answering "yes" does not automatically exclude you from further consideration for the position.

If yes, include nature of the intentional tort and the disposition of the action: _____

How did you learn of our Company? _____

If referral, who were you referred by? _____

Have you ever applied or worked here before? Yes ☐ No ☐ If yes, provide dates: _____

Have you ever applied or worked at our Company before? Yes ☐ No ☐ If yes, provide dates: _____

Are you legally authorized to work in the United States? Yes ☐ No ☐

Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status)? Yes ☐ No ☐

Note: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

DRIVING RECORD (Answer only if driving is a requirement of the job for which you are applying)Do you have a valid drivers license? Yes ☐ No ☐ State _____ License No.: _____Have you had any tickets? Yes ☐ No ☐ If yes, please explain: _____Has your license ever been suspended or revoked? Yes ☐ No ☐ If yes, please explain: _____

Note for Massachusetts applicants ONLY: In the following question, the reference to DUI/DWI includes OUI. You are only required to list convictions within the past 5 years.

Do you have any DUI or DWI convictions? Yes ☐ No ☐ If yes, please state when you were convicted and explain: _____

*If you are an applicant for a commercial motor vehicle position,
you must also complete the special section at the back of this application*

RESIDENCES: (Part 391.21 (b)(3)) (Please provide your addresses of residence for the past seven years beginning with the most recent address.)

Street Address	City, State and Zip Code	From	To
Street Address	City, State and Zip Code	From	To
Street Address	City, State and Zip Code	From	To
Street Address	City, State and Zip Code	From	To
Street Address	City, State and Zip Code	From	To

EDUCATION: (May or may not be considered depending on job applied for.)

Describe any educational degrees, skills, training or experience you believe are relevant to the job applied for:

Name, City and State of Educational Institution	Graduated?		If no Degree, Credits earned	Type of Degree Received or Expected	Major	Minor	Grade Point
	Yes	No					Overall GPA
High School	<input type="checkbox"/>	<input type="checkbox"/>					
College or University	<input type="checkbox"/>	<input type="checkbox"/>					
Technical/GED	<input type="checkbox"/>	<input type="checkbox"/>					
Licenses/Certifications/Other	<input type="checkbox"/>	<input type="checkbox"/>					

EMPLOYMENT HISTORY: *(Please complete for all full-time or part-time employment beginning with most recent employer.**You may include as part of your employment history any verified work performed on a volunteer basis.)*

Company Name		Tel #			
Address		Dates Employed	From	To	
Name of Supervisor	May we contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Rate of Pay	Start	Last
State job titles and describe job duties			Reason For Leaving		

*For Driver Applicants only:*Were you subject to the FMCSA Regulations while employed? Yes ☐ No ☐Was your job designated as a safety-sensitive function in any DOT-Regulated mode¹ subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes ☐ No ☐

Company Name		Tel #			
Address		Dates Employed	From	To	
Name of Supervisor	May we contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Rate of Pay	Start	Last
State job titles and describe job duties			Reason For Leaving		

*For Driver Applicants only:*Were you subject to the FMCSA Regulations while employed? Yes ☐ No ☐Was your job designated as a safety-sensitive function in any DOT-Regulated mode¹ subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes ☐ No ☐

Company Name		Tel #			
Address		Dates Employed	From	To	
Name of Supervisor	May we contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Rate of Pay	Start	Last
State job titles and describe job duties			Reason For Leaving		

*For Driver Applicants only:*Were you subject to the FMCSA Regulations while employed? Yes ☐ No ☐Was your job designated as a safety-sensitive function in any DOT-Regulated mode¹ subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes ☐ No ☐

Company Name		Tel #			
Address		Dates Employed	From	To	
Name of Supervisor	May we contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Rate of Pay	Start	Last
State job titles and describe job duties			Reason For Leaving		

*For Driver Applicants only:*Were you subject to the FMCSA Regulations while employed? Yes ☐ No ☐Was your job designated as a safety-sensitive function in any DOT-Regulated mode¹ subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes ☐ No ☐¹DOT modes include the United States Coast Guard, the Federal Aviation Administration, the Federal Highway Administration, the Federal Railroad Administration, the Federal Transit Administration, the Federal Motor Carrier Safety Administration and the Research and Special Programs Administration.

REFERENCES: (Please list three persons not related to you who know your qualifications.)

NAME	ADDRESS	PHONE	RELATIONSHIP

Please explain any gaps in your employment history. _____

Have you ever been discharged or forced to resign? Yes ☐ No ☐ If yes, explain: _____

Did you receive any discipline in the last 12 months of active employment? Yes ☐ No ☐ If yes, please explain: _____

Were you given a performance evaluation within the last 12 months of active employment? Yes ☐ No ☐ If yes, what was the range of scores used and what was your score? _____

Have you signed any non-compete or non-solicit agreement with any other employer that might restrict you from working for this company? Yes ☐ No ☐ If yes, please explain: _____

(You may be required to furnish a copy of the agreement)

MILITARY SERVICE: (Complete only if you served in the military)

Branch of Service: _____ Number of Years/Months of Service: _____

Rank at Discharge: _____ Date of Discharge: _____ Reason for leaving: _____

Describe any military skills, training or experience you believe are relevant to the job applied for: _____

LIE DETECTOR TESTS

Massachusetts Applicants Note: It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Maryland Applicants Only: An employer may not require or demand, as a condition of prospective employment or continued employment, an individual submit to or take a lie detector or similar tests. An employer who violates this law is guilty of a misdemeanor and subject to a fine not exceeding \$100. I have read and acknowledge this notice:

Applicant's Signature: _____

CRIMINAL RECORD INFORMATION

All Applicants: You must answer all four questions below (with the exception of New Hampshire applicants, who must answer questions "a" through "c" in the New Hampshire box, and then question #4 on the following page). In addition, Massachusetts applicants should only answer these questions if the box next to "Massachusetts Applicants" below is checked.

When answering the following questions, you may exclude any records expunged, annulled, sealed, discharged, dismissed, erased under first-offender law or otherwise eradicated by statute or court order. You may also exclude a first conviction for any of the following misdemeanors; drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace.

A criminal conviction will not necessarily be a bar to employment but will be considered in relation to specific job requirements.

California Applicants: When answering questions #1 through #4 below, you need not identify any conviction for a marijuana-related offense if the conviction is more than two years old, or any information pertaining to referral to and participation in any pre-trial or post-trial diversion program.

Connecticut Applicants: When answering questions #1 through #4 below, you need not disclose the existence of any arrest, criminal charge or conviction records which have been erased pursuant to Conn. Gen. Stat. §§46b-146, 54-760, 54-142a. Also note that the aforementioned criminal records subject to erasure are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nulled, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon; and any person whose criminal records have been erased pursuant to the aforementioned sections is deemed to have never been arrested within the meaning of the general statutes with respect to the proceedings so erased and may so swear under oath.

Massachusetts Applicants: Do not respond to these questions unless this box is checked: ☐

If you are required to respond to these questions because this box is checked, please note that when answering these questions, an applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances, or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances, and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution. When answering question #3, you may exclude a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace. You may also exclude any convictions of misdemeanors which are more than five years old if you have not been convicted of a misdemeanor in the past five years.

New Hampshire Applicants: Answer the following questions (a, b, and c) and then skip to question #4 on the next page (do not answer questions 1 through 3).

- a. Have you ever been convicted of a crime that has not been annulled by a court?

Yes ☐ No ☐

Date of Conviction: _____

- b. Have you been convicted within the last seven years of any of the following crimes that have not been annulled by a court: misappropriation of funds, embezzlement, or similar for other dishonest conduct; or an offense involving the use of a weapon; for burglary, robbery, breaking and entering or theft; or physical assault or other violent crime?

Yes ☐ No ☐

Date of Conviction: _____

- c. Have you been convicted of or completed a period of incarceration within the past five years for any misdemeanor that has not been annulled by a court?

Yes ☐ No ☐

Date of Conviction: _____

1. Have you been convicted of a felony within the last seven years?

Yes ☐ No ☐

Date of Conviction: _____

2. Have you been convicted within the last seven years of misappropriation of funds, embezzlement, or similar for other dishonest conduct; or an offense involving the use of a weapon; for burglary, robbery, breaking and entering or theft; or physical assault or other violent crime?

Yes ☐ No ☐

3. Have you been convicted of or completed a period of incarceration within the past five years for any misdemeanor?

Yes ☐ No ☐

If the answer to the above question is "yes", please state whether you were convicted more than five years ago for any offense?

Yes ☐ No ☐

4. A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe your criminal conviction(s) including penalty (ies) imposed, listing the nature of your offense(s), and your rehabilitation since the conviction(s). _____

APPLICANT'S ACKNOWLEDGMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document may be cause for my dismissal at any time without prior notice. I consent to and authorize this Company to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give the Company (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR MY EMPLOYER WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER POLICY, CUSTOM, BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE BASIC EMPLOYMENT POLICIES, PERSONNEL HANDBOOK OR ANY PERSONNEL MANUALS) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE EMPLOYER. I ALSO UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT MAY NOT CHANGE ABSENT AN INDIVIDUAL WRITTEN AGREEMENT SIGNED BY BOTH ME AND THE PRESIDENT OF THE COMPANY.

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination; submit to a background investigation; take a pre-employment drug test. If I am offered employment or start work before any required test is completed, my employment is contingent on a satisfactory result on all required tests. I authorize the release of any background check results of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from the Company at the conclusion of this 30 day period, it is my responsibility to complete a new application if I still wish to be considered for employment.

CALIFORNIA APPLICANTS ONLY: I understand the Company may obtain, without using the services of a third party investigative consumer reporting agency, public records pertaining to my character, general reputation, personal characteristics or mode of living during its evaluation of my application for employment and, if employed, during my employment. By checking the following box, I waive my right to receive copies of public records obtained by the Company. ☐

Signature: _____ Date: _____

NOTIFICATION OF RIGHTS FOR APPLICANTS FOR A COMMERCIAL MOTOR VEHICLE DRIVER POSITION

The Information you provide in accordance with FMCSA regulations may be used, and your previous employers may be contacted for the purpose of investigating your safety performance history information (as required by 49 C.F.R. 391.23). You have the following rights regarding the investigative information that will be provided to the Company. (1) The right to review information provided by previous employers; (2) The right to have errors in the information corrected by the previous employer and for that previous employer to re-send the corrected information to the Company; (3) The right to have a rebuttal statement attached to the alleged erroneous information, if the previous employer and you cannot agree on the accuracy of the information. If you wish to review previous employer-provided investigative information, you must submit a written request to the Company, no later than 30 days after being employed or being notified of denial of employment. The Company will provide the requested investigative information to you within five (5) business days of receiving this written request, or five (5) business days of receipt of the requested information from the previous employer, whichever is later.

CERTIFICATION FOR ALL APPLICANTS - PLEASE READ CAREFULLY

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. (Part 391.21(b) (12))

Signature: _____ Date: _____