



METRO READY MIX

Applicant Name _____

Application Instructions

Thank you for applying for employment with Metro Ready Mix LLC.

Federal Law requires that we obtain much of the information requested in this application for all commercial Motor Vehicle driver applicants. It is very important that you follow these instructions while filling out your application. Failure to do so may prevent us from processing your application.

Enclosed in this packet is a job description for the position you are applying for. Please read this description and if you meet the qualifications, sign and date where provided.

If you meet the qualifications for the position you are applying for, you should then complete the following:

- The four page application form, as completely as possible
- Sign the Driver Certifications
- Sign the Certification and Release form
- Request for Information from Previous Employers (All driving jobs for past 3 years)
- Sign and date the top of the form.
- Consents for Pre-Employment Physical and Pre-Employment Drug Screen
- Print name at the top, sign and date each consent form
- Affirmative Action Voluntary Information

Please read the statement at the top of the page and fill out the form if you choose to provide the information.

The information provided by you may be used, and your prior employers may be contacted, for the purpose of investigating your background as required by the Federal Motor Carrier Safety Administration. Furthermore, as part of this investigation, a copy of your motor vehicle driving record may be obtained. By signing the application form, you are authorizing Metro Ready Mix to conduct this investigation. Failure to sign the application will prevent us from processing your application further.

All driver applicants must, in conformance with Department of Transportation regulations, submit to a urine drug screen prior to being employed as a D.O.T. qualified driver with Metro Ready Mix. Any applicant that has a positive test result for any of the substances listed below, or that refuses to provide an appropriate sample, will be considered unqualified to operate a commercial motor vehicle under D.O.T regulations, and therefore unqualified for employment as a driver for Metro Ready Mix.

Marijuana
Cocaine

Barbiturates
Opiates

Amphetamines (including methamphetamine)
Phencyclidine (PCP)

Metro Ready Mix is an Equal Opportunity Employer and all qualified applicants will receive consideration without regard to race, creed, sex, color, age, national origin or disability.

Upon completion of these items, please submit them to Metro Ready Mix @ 343 West 400 South, Salt Lake City, Utah 84101 or fax them to 801-456-1630.

METRO READY MIX

READY MIX TRUCK OPERATOR

The purpose of this position is to drive, operate, service and maintain a ready mix concrete truck in a safe and professional manner. The position must give special attention to customer service, as this is the point of most frequent contact with our customers. Individuals in this position should be willing and able to provide our customers with quality service, doing all they can to make our customer service the best in the industry.

Reports to: Truck Boss

Type: Non-Exempt Hourly

QUALIFICATIONS

- Minimum **Class B** Commercial Drivers License with Airbrake endorsement.
- At least 21 years of age.
- Prior truck driving experience mandatory, with 6 months minimum preferred.
- Ready mix truck driving, or related construction experience, preferred.
- Driving record in conformity with Metro Ready Mix, vehicle policy requirements (3 or less moving violations! Accidents and no major traffic violations in 3 years).
- Ability to pass basic training in safety, quality and maintenance.
- Must be reliable.
- Must have telephone or other reasonable means by which you can be contacted.
- Ability to provide negative pre-employment drug screen per DOT requirements.
- Some mechanical ability to perform required pre- and post-trip inspections and to correct minor deficiencies.
- High school diploma, or the equivalent, preferred.

RESPONSIBILITIES

- Operates vehicles and maintains personal safety in accordance with Company, FMCSA, and OSHA policy guidelines.
- Stays informed of all applicable DOT rules and regulations, and operates within those rules and regulations.
- Performs daily pre-trip and post trip inspections on truck and related equipment for operation and safety.
- Keeps truck in premium mechanical condition and clean inside and outside by adhering to truck checkout and cleaning procedures.
- Uses sound judgment when setting up equipment on job sites that may be dangerous for the operator, equipment or other personnel.
- Reads and understands delivery tickets, especially with regard to delivery location and types and quantity of materials to be delivered.
- Reports back to dispatch using proper communication procedure, on status of job and for other scheduling purposes.
- Performs small repair and maintenance on truck and equipment such as greasing, hose changing, bolt tightening, etc.
- Reports all mechanical problems with equipment to the proper individual(s)
- Performs a variety of other duties assigned by the plant operator relative to the plant and grounds.
- Performs other assigned duties, and operates other vehicles and/or equipment, with regard to the above standards.
- Performs duties in an efficient manner and assures customer satisfaction.

METRO READY MIX

This is a construction and service-oriented business which consists of variable hours and working conditions due to the demand of the customer and the construction industry. The normal construction season is considered to be from March 1 through December 15. Work hours during this time vary according to workload, weather conditions, and scheduling requirements. It is not uncommon to work 12 or more hours in a shift, while on other days work may not be available. Overtime hours during this period are likely. During the off-season months, some individuals may receive temporary layoffs, while others may work full or part time. However, all drivers are expected to be available for work as needed during this period.

Basic Physical Requirements

Required Task	Occasional 0-33%	Frequent 33-66%	Constant Above 67%
Sitting		X	
Standing		X	
Walking	X		
Bending/Kneeling/Crouching/Stooping	X		
Reaching above the shoulders	X		
Climbing (stairs, ladders, etc.)	X		
Lifting/Carrying up to 60 lbs	X		
Pushing Pulling over 60 lbs	X		
Operating a vehicle (as part of job)		X	
Being around and/or operating moving equipment		X	
Reading Monitoring various gauges on equipment		X	
Hand Movements:			
Recording Data	N/A		
Operating Office Equipment	N/A		
Operating Computer	N/A		
Simple Grasping (right and left)		X	
Firm Grasping (right and left)	X		
Fine Manipulating (right and left)	N/A		
Foot Movements to Operate Foot Controls	X		
Office	N/A		
Multiple Locations		X	
Plant		X	
Equipment Maintenance or Repair area	X		
Rough Terrain	X		
Other	X		
Vision: Good Vision, Corrected to Normal	Color Definition Required	YES	
Hearing: Good Hearing, Corrected to Normal			
Mobility: Ability to be mobile throughout required work areas			
Ability to Communicate Understand/Access required information and perform job			
Not allergic to concrete			

NOTE: This is not necessarily an exhaustive list of the job duties and requirements associated with this job, but is intended to be an accurate reflection of the job at present.

I have read and understand the job description and can perform the essential functions of this job with or without reasonable accommodation.

Signature _____ Date _____

Metro Ready Mix
 343 West 400 South
 Salt Lake City, Utah 84101

APPLICATION FOR EMPLOYMENT

Date of Application

Full Name

Current Address

Social Security Number

Telephone Number(s)

City State Zip

e-mail address

Applicant Note: This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. Please answer all appropriate questions completely and accurately. False or misleading statements during the interview and on this form are grounds for terminating the application process or, if discovered after employment, terminating employment. Metro Ready Mix is an EEO/AA Employer. It is the policy of this Company to assure that applicants are considered, and that our employees are treated during employment, without regard to their race, disability, color, sex, religion, age, national origin, or with consideration as to whether the applicant/employee is a Vietnam Era Veteran or Post Vietnam Veteran with Disability.

PLEASE PRINT CLEARLY

Position for which you are applying _____ Location _____

Are you willing to work at other locations? Yes _____ No _____

How did you learn of this position? (Source) _____

Have you ever worked for this company? Yes _____ No _____

If yes, please indicate where and when employed: _____

What date can you start? _____

Have you used any names or Social Security Numbers other than given above? If so, please list in comments below. Have you ever been convicted of a crime (other than traffic offenses) in the past seven years? If so, please describe in the boxes below. (Conviction will not necessarily be a bar to employment. In accordance with company policy and applicable state and federal laws, certain factors will be reviewed to determine your eligibility for employment.)

Date of incident	City & State	Charge

Comments:

REQUEST FOR INFORMATION

From previous Employer

I hereby authorize you to release the following information to Metro Ready Mix for purposes of investigation as required by Section 391.23 of the Federal Motor Carrier Safety Regulations. You are released from any and all liability, which may result from furnishing such information.

Date: _____ Applicants Signature: _____

Dear Sir/Madam:

The individual named below has made application to this company for a position as a Driver and states that he/she was employed by you as a Driver, from _____ to _____.

We very much appreciate your assistance in completing, in confidence, the information requested below. Please return via mail or fax to 801-456-1630. Thank you for your time:

Sincerely,
George Nourse (Safety Director)
Metro Ready Mix
343 West 400 South
Salt Lake City, Utah 84101

Name of Applicant: _____ Social Security Number _____

1. Employed from _____ to _____ as _____ at
wage or salary of _____ per [hr day week month mile other] (circle one)

2. Did he/she drive a motor vehicle for you? _____ Straight Truck? _____ Tractor-Trailer? _____
Bus? _____ Other (Please Specify) _____

3. Was he/she a safe and efficient driver? _____

4. Reason for leaving: Resigned ___ Laid off ___ Terminated ___ Other _____
Eligible for rehire? ___ Yes ___ No ___ Upon review

5. Was his/her general conduct satisfactory? _____

6. Please advise as to history of past driving record, if available for the past three years.

Accidents:

Citations:

Driver Qualification Information:

Commercial Drivers License Number _____

License Class _____

State of issue _____

Endorsements _____

Expiration Date _____

Do you have any other unexpired Commercial Drivers License? Yes _____ No _____ (If yes, list on last page)

Please give a brief description of your experience in the operation of motor vehicles, including types and years operated.

Driver's Certification

I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past three years. (Attach additional page if necessary)

Date of conviction	Offense	City/State	Type of motor 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 three years.

_____ (signature)

I certify that the following is a true and complete list of motor vehicle accidents in which I was involved in during the last three years.

Date of Accident	City/State	Nature of accident and type of injuries (if any)

If no accidents are listed above, I certify that I have not been involved in a motor vehicle accident in the last three years.

_____ (signature)

Has your license ever been denied, revoked or suspended? Yes _____ No _____

(If yes, please attach a statement setting forth, in detail, all facts and circumstances regarding such action)

Previous Employment History: List all past employers for the preceding **ten years**. (Use additional sheets if necessary)

Most Recent Employer	Are you currently working for this employer If yes, may we contact	Yes _____ Yes _____	No _____ No _____
_____	(____) _____	_____	_____
Company Name	Phone Number	Fax Number	
City _____ State _____	Job Title and Duties _____		
From _____ to _____	Immediate Supervisor _____		
Dates Employed _____ per _____	Reason for leaving _____		
Salary _____ (hour, week, mile)			
Second Most Recent Employer			
_____	(____) _____	_____	_____
Company Name	Phone Number	Fax Number	
City _____ State _____	Job Title and Duties _____		
From _____ to _____	Immediate Supervisor _____		
Dates Employed _____ per _____	Reason for leaving _____		
Salary _____ (hour, week, mile)			
Third Most Recent Employer			
_____	(____) _____	_____	_____
Company Name	Phone Number	Fax Number	
City _____ State _____	Job Title and Duties _____		
From _____ to _____	Immediate Supervisor _____		
Dates Employed _____ per _____	Reason for leaving _____		
Salary _____ (hour, week, mile)			
Fourth Most Recent Employer			
_____	(____) _____	_____	_____
Company Name	Phone Number	Fax Number	
City _____ State _____	Job Title and Duties _____		
From _____ to _____	Immediate Supervisor _____		
Dates Employed _____ per _____	Reason for leaving _____		
Salary _____ (hour, week, mile)			

Education Please circle highest grade completed 7 8 9 10 11 12 13 14 15 16 16+
 If your school records are under a different name than listed on page 1, please enter that name: _____

Name	City/State	Completed	Degree
High School			
College			
Trade/Vocational			

CONFIDENTIAL REPORT OF PERSONAL REFERENCE

Please indicate your opinion by placing a check (v) in the appropriate column.

CHARACTERISTICS	EXCELLENT	GOOD	FAIR	POOR
Disposition, Tact, Ability to get along with others				
Initiative, Resourcefulness				
Safety Habits				
Driving Skill				
Attitude				
Loyalty				
Attendance				

Any other remarks _____

In the past three years has:

- 1. This person ever tested positive for a controlled substance? Yes _____ No _____
- 2. This person ever had an alcohol test with a Breath Alcohol Concentration of 0.04 or greater? Yes _____ No _____
- 3. This person ever refused a required test for drugs or alcohol? Yes _____ No _____
- 4. This person ever had other violations of DOT agency drug & alcohol testing regulations? Yes _____ No _____

If the answer is yes to any of the above, please give the Medical Review Officer's name, address and phone number for further reference:

Name: _____ Phone #: _____

Address: _____

Person completing this form: _____ Title: _____

Signature: _____ Date: _____

METRO READY MIX

Name:

Consent For Pre-Employment Physical

I understand that pursuant to Company policy, I will be required to undergo a pre-employment physical after I have received an offer of employment with Metro Ready Mix. That offer of employment will be conditional upon my submission to a pre-employment physical, and upon a “pass” result for that physical.

I understand that the physical will be used to verify my ability to perform the essential functions of the job as detailed in this application packet. Further, that if I fail to pass the physical, or if I refuse to submit to the physical, I will be considered unqualified for employment as a driver for Metro Ready Mix.

I understand that the physician will maintain the results of the physical, and will report the results to the Company. The results will be held in strict confidentiality, and will not be released to any other party without my written consent.

I further understand that the expense for this physical will be my responsibility. Metro Ready Mix will make and advance payment of my wages for this cost, and deduct this amount from my first paycheck. The cost of the physical and physician’s report is approximately \$55.00, depending on location. By signing this form, I hereby authorize this deduction.

Upon completion of my probationary period of employment, Metro Ready Mix will reimburse the cost of the physical to me.

Having read and understood this consent, I agree to submit to a physical if I am offered employment with Metro Ready Mix.

By this authorization, I release to the extent permitted by law, any laboratory, medical, and Company personnel involved in the examination and testing process, from any and all liabilities alleged to arise from the release and use of information obtained pursuant to this Consent.

Date:

Applicant Signature:

METRO READY MIX

Name:

Consent For Pre-Employment Physical

I understand that pursuant to Department of Transportation regulations, I must submit to a urine drug screen before I may be employed as a D.O.T. qualified driver with Metro Ready Mix.

I understand that if I test positive for any of the substances listed below, or if I refuse to provide an appropriate sample, I will be considered unqualified to operate a commercial motor vehicle under D.O.T. regulations, and that I will therefore be unqualified for employment as a driver for Metro Ready Mix.

Amphetamines (including methamphetamine)
Barbiturates
Cocaine
Marijuana (including cannabinoids and THC derivatives) Opiates
(and their derivatives including morphine and codeine)
Phencyclidine (PCP)

I understand that the Medical Review Officer (MRO) will maintain the results of the drug test, and will report the results to the Company. The results will be held in strict confidentiality, and will not be released to any other party without my written consent.

I further understand that the expense for this drug screen will be my responsibility. Metro Ready Mix will make and advance payment of my wages for this cost, and deduct this amount from my first paycheck. The cost of the drug screen and Medical Review Officer's report is \$45.00. By signing this form, I hereby authorize this deduction.

Upon completion of my probationary period of employment, Metro Ready Mix will reimburse the cost of the drug screen to me.

Having read and understood this consent, I agree to submit to a urine drug screen if I am offered employment with Metro Ready Mix. Further, that any offer of employment with Metro Ready Mix is conditional upon my submission to a drug screen, and upon a negative result for that drug screen.

By this authorization, I release to the extent permitted by law, any laboratory, medical, and Company personnel involved in the examination and testing process, from any and all liabilities alleged to arise from the release and use of testing information obtained pursuant to this Consent.

Date:

Applicant Signature:

References

Include only individuals familiar with your work ability. Do not include relatives.

Name	Address/Phone	Years Known/Relationship

Yes _____ No _____ Have you been given a job description or had the essential functions of the job explained to you?

Yes _____ No _____ Do you understand these essential functions?

Yes _____ No _____ Can you perform the essential functions of this job with or without reasonable accommodations?

Comments

Use this section to list any additional, licenses or certificates that may be job-related. You may also take the opportunity to provide us with additional information you may feel is of value to the job or the company.

CONDITIONS OF EMPLOYMENT

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. Also, this application for employment shall be considered only as to the position indicated by the Applicant on page 1.

I hereby understand and acknowledge that, unless otherwise defined by applicable laws, any employment relationship with this organization is of an "at will" nature which means that the Employee may resign at any time and the Employer may terminate the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

I understand that I must undergo a pre-employment drug screen, the result of which will determine whether I will or will not be allowed employment. Further, that after an offer of employment is made, I will be required to complete a pre-employment physical.

The company will hire only United States citizens and aliens authorized to work in the United States. All new employees will be required to complete an "Employment Eligibility Verification: (Form I-9)" and produce requested documentation after employment.

Certification and Release: I certify that I have read and understand the Applicant Note on page one of this form, and the Conditions of Employment above, and that the answers given by me to the foregoing questions and the statements made by me are true and complete to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in this application, whether on this document or not, may result in rejection of my application or discharge at any time during employment. I authorize the Company and/or its agents, including consumer reporting bureaus to verify any of this information. I authorize all former employers, persons, schools, companies and law enforcement authorities to release any information concerning my background to the Company, and hereby release any said persons, schools companies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information.

Signature

Date