



F & S Trucking

Lake Charles, LOUISIANA

DRIVER PROGRAM

OFFICE (337) 496-3764

FAX (337) 855-9623

A copy of Driver's License, Social Security card, TWIC Card and Current DOT Physical must be submitted with application.

www.fandstrucking.com

TRUCK OPERATOR QUALIFICATION CRITERIA

REQUIREMENTS

Operator must be **23-65** years of age or older.

Must have **2 years' experience** driving dump trucks within the last five years.

Must have a **current TWIC card**. (Transportation Workers Identification Credential)

Maximum limit of **(2) two moving violations** in previous (3) three years period.

No more **than (2) two preventable motor vehicle accidents**.

DUI OR DWI MUST BE AT LEAST FIVE YEARS OLD TO BE CONSIDERED.

EMPLOYMENT

Operator must accurately list all periods of employment, self-employment, training and periods of unemployment for the past 3 years. If operating a commercial vehicle within the past 10 years, you must also list past employment history for the period of the time involved in driving a commercial vehicle.

PHYSICAL REQUIREMENTS

Operator must be in good physical condition and capable of performing lifting, bending and climbing.

Applicant must successfully complete a DOT approved physical and drug screen prior to qualifying.

Previous physicals will be accepted, if not more than (1) one year old. Applicant must present the long form physical and matching medical card.

Date

Signature

PLEASE READ CAREFULLY AND SIGN BELOW

I understand that the information supplied herein shall be used, and that prior motor carriers / employers shall be contacted, for the purpose of complying with the Federal Motor Carriers Safety Regulations.

Further, this document is following Federal and State equal opportunity laws, qualified applicants are considered without regard to race, color, religion, sex, national origin, age, marital status, or non-job-related disability.

It is agreed and understood that any misrepresentation of information given herein shall be considered an act of dishonesty, and excluded from hiring list.

It is agreed and understood that F & S Trucking may investigate any and all information of concern supplied herein.

I further authorize F & S Trucking to make such investigations and inquires of my, employment, medical history and other related matters as may be necessary, whether of record or not, in arriving at a decision concerning this application.

I hereby release employers, schools, and other persons from all liability in responding to inquiries and releasing information in connection with my application including previous alcohol and drug test results.

It is agreed and understood that this is an application for qualification with F & S Trucking. It is further agreed and understood that this document in no way obligates the contracting motor carrier.

It is agreed and understood that the applicant will be on a probationary period during which time the applicant can be disqualified without recourse. The probationary period will be 6 months.

Date

Signature



F & S Trucking

COMPENSATION

STARTING PAY All Dump Truck drivers are paid by the hour, the pay will be \$16.00 during probationary period of 6 months.

REIMBURSEMENT Reimbursed 100% with receipts on following check.

WHEN PAID Weekly, based on paperwork received by Friday before 5:00 PM will be settled by day end or Direct Deposit if set up.

VACATION Paid based on an average weekly compensation for prior year not exceeding \$840.00 per week.

2 years = 1week

3-8 years = 2weeks

9-14 years = 3weeks

15 or more = 4weeks

Date

Signature

DRIVERS JOB DESCRIPTION

JOB TITLE: DRIVER

General Summary of Duties operating dump truck; Pick-up and delivery materials to and from various locations. Must follow all safety rules and regulations. Must be able to get clean shaven, when required; as per plant requirements. As part of our ongoing safety program, all F&S trucks will be equipped with dash-cam cameras and equipped with a satellite tracking device.

Supervision Received: President, Operations Manager, Safety Manager and /or Dispatcher

Supervision Exercised: None

Typical Physical Demands: Requires sitting for long periods of time. Driving of heavy trucks under various weather and road conditions for periods up to 12 hours at a time. Getting in and out of truck regularly. Climb to heights of 15 feet, and have complete use of upper and lower torso. Requires normal range of hearing and sight.

Typical Working Conditions: Normal driving environment. Working duties may consist of nights and weekend.

Duties to include: (This list may not include all of the duties assigned.)

- Must read, understand and follow company handbook.
- Call in for dispatch assignments every morning and evening.
- Pick-up and deliver material as instructed in a timely manner.
- Pre-trip dump truck each day, and through-out day as needed.
- Secure all loads for safe transporting per Department of Transportation (DOT) regulations.
- Cover loads when necessary or required with tarp.
- Obtain appropriate signatures on all necessary paperwork.
- Maintain and deliver to F & S Trucking, all paperwork related to trip. Such as Billing Tickets signed at days end by receiver of materials. Company and customer Bill of Ladings, manifests, expense receipts, weight tickets etc.
- Inspect and trouble shoot mechanical and tire problems on truck and trailer.
- Report to F & S Trucking office all repairs needed to trucks; following prescribed procedure.
- Follow all safety rules and/or regulations as required by employer and customers.
- Must carry all proper Personal Protective Equipment (PPE) at all times; such as FFR (Fire Flame Retardant) clothing, highly visible vest and hard hat.
- No soft sole shoes such as flip flops.
- Must keep and maintain in working order all company issued equipment.
- Attend month safety meeting & training session.
- Must maintain good housekeeping inside of cab.

Performance Requirement Knowledge, Skills and Abilities

Maintain a valid "Commercial Driver's License", must pass DOT physical and drug screening. Must be insurable. Knowledge of all facts of Dump truck operations. Knowledge of safety regulations as prescribed in the "Federal Motor Carrier Safety Regulation Manuel".

Signature

____/____/____
Date

DRIVER'S APPLICATION FOR EMPLOYMENT

F & S TRUCKING LLC

301 East Park Manor Dr.

Lake Charles, LA 70611 Ph # (337) 496-3764

For Office Use Only	Orientation	Initials	For Office Use Only	Complete	Initials
Application Complete			Drug/Alcohol Testing		
Past Employment Verification			Orientation		
Interview			Training Rider Program		

(Answer all questions & please print)

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age marital status, or non-job-related disability.

Position(s) applied for _____ Date of Application _____

Name _____ Social Security No _____
Last First Middle Int

Address _____ - _____
Street City State zip

How Long? _____ Phone _____

Previous _____ - _____ How Long _____
Address *Street City State zip*

Do you have the legal right to work in the United States? _____

Date of Birth ____/____/____ Can you provide proof of age? _____

Do you currently use any illegal drugs? _____ Have you ever refused a drug or alcohol test? _____

Have you ever tested positive for controlled substance? ____ Had an alcohol test result greater than 0.04? _____

Have you ever had driver's license revoked or suspended? _____ If Yes Explain _____

Are you employed now? _____ If yes, may we contact your current employer? _____

Email Address _____ Who referred you? _____ Rate of pay expected ____/Hr.

Is there any reason you might be unable to perform the functions of the job for which you have applied?

(as described in the attached job description)? No or Yes, if Yes, please explain. _____

EMPLOYER

Employment History

All driver applicants to drive in interstate commerce must provide the following information on all employment during the preceding 3 years.

Applicants to drive a commercial motor vehicle in intrastate or interstate commerce shall also provide an additional 3 years information on those employers for whom the applicant operated such vehicle. (NOTE: List employers in reverse order starting with most recent. Add another sheet as necessary)

EMPLOYER		DATE	
<i>Company Name</i>		<i>From Month Yr.</i>	<i>To Month Yr.</i>
<i>Address</i>		<i>Position Held</i>	
<i>City</i>		<i>Salary / Wage</i>	
<i>Contact Person</i>	<i>Phone</i>	<i>Reason for Leaving</i>	

EMPLOYER		DATE	
<i>Company Name</i>		<i>From Month Yr.</i>	<i>To Month Yr.</i>
<i>Address</i>		<i>Position Held</i>	
<i>City</i>		<i>Salary / Wage</i>	
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<i>Address</i>		<i>Position Held</i>	
<i>City</i>		<i>Salary / Wage</i>	
<i>Contact Person</i>	<i>Phone</i>	<i>Reason for Leaving</i>	

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<i>Company Name</i>		<i>From Month Yr.</i>	<i>To Month Yr.</i>
<i>Address</i>		<i>Position Held</i>	
<i>City</i>		<i>Salary / Wage</i>	
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<i>Address</i>		<i>Position Held</i>	
<i>City</i>		<i>Salary / Wage</i>	
<i>Contact Person</i>	<i>Phone</i>	<i>Reason for Leaving</i>	

EMPLOYER		DATE	
<i>Company Name</i>		<i>From Month Yr.</i>	<i>To Month Yr.</i>
<i>Address</i>		<i>Position Held</i>	
<i>City</i>		<i>Salary / Wage</i>	
<i>Contact Person</i>	<i>Phone</i>	<i>Reason for Leaving</i>	

EMPLOYER		DATE	
<i>Company Name</i>		<i>From Month Yr.</i>	<i>To Month Yr.</i>
<i>Address</i>		<i>Position Held</i>	
<i>City</i>		<i>Salary / Wage</i>	
<i>Contact Person</i>	<i>Phone</i>	<i>Reason for Leaving</i>	

EXPERIENCE AND QUALIFICATIONS --- OTHER _____

SHOW SPECIAL COURSES OR TRAINING THAT WILL HELP YOU AS A DRIVER: _____

WHICH SAFE DRIVING AWARDS DO YOU HOLD AND FROM WHOM? _____

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 ALREADY SHOWN)

TO BE READ AND SIGNED BY APPLICANT 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 authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

Applicant's Signature

Date

(THIS SECTION TO BE FILLED IN F&S COMPANY REPRESENTATIVE)

	<i>SUPERIOR</i>	<i>GOOD</i>	<i>FAIR</i>	<i>BELOW ADV</i>	COMMENTS
APPLICATION					
INTERVIEW					
ATITUDE					
PAST EMPLOYMENT					

..... PROCESS RECORD.....

APPLICANT HIRED _____

REJECTED _____

DATE EMPLOYED _____

CLASSIFICATION _____

SIGNATURE OF INTERVIEWING OFFICER OR COMPANY REPRESENTATIVE _____

TERMINATION OF EMPLOYMENT

DATE TERMINATED _____ DISMISSED _____ VOLUNTARILY QUIT _____

OTHER _____



ACKNOWLEDGEMENT Pre-Employment Drug Screening Consent

I (please print) _____, hereby voluntarily consent to the collection of urine, blood, plasma, or breath sample to be used for drug/alcohol screening. I also authorize and give full written permission to the doctor, clinic, hospital or agents and associates to send this specimen to the laboratory for screening. I also authorize these results to be given to F & S Trucking, and its authorized agents and/or employees, partners, or associates.

I have been informed and understand that I retain the expressed right to terminate the taking of urine, blood, plasma or breath samples at any time I so desire and to leave the room without further delay.

I have been informed and understand that the results will be released to F & S Trucking, solely for the purpose of consideration of employment, and such authorization at any time (except to extent that action has been taken in reliance thereon).

Employee Signature _____

Date _____

Witness Signature _____

Date _____



F & S Trucking

DRUG AND ALCOHOL TESTING RESULTS REQUEST – RELEASE FORM

MAIL TO FORMER EMPLOYER:

I _____, _____
(Please Print Name) (SS#)

do hereby authorize F & S Trucking to contact my previous employer(s) in accordance with current US DOT rules and regulations as set forth in 49 CFR 382.413 in order to obtain the following information for the preceding three years:

1. Alcohol test with a result of 0.04 alcohol concentration or greater;
2. Verified positive controlled substances test results; and
3. Refusals to be tested.

I fully understand the above, and do hereby give my consent to obtain the information required by 49 CFR 382.413.

Drivers Signature Date

(Detach here for your record)

(Name of Former Employer) (Date)

You are hereby authorized to give to F & S Trucking all information regarding my drug and alcohol testing result while in your employ, and you are released from any and all liability which may result from furnishing such information to the above-named company.



F & S Trucking

MOTOR VEHICLE DRIVER’S CERTIFICATION OF VIOLATIONS

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 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.

(Date of Certification)

(Driver’s Signature)

(Motor Carrier’s Name)

(Motor Carrier’s Address)

(Reviewed by: Signature)

(Title)

REQUEST FOR INFORMATION

Office (337) 496-3764
WWW.FANDSTRUCKING.COM

Fax (337) 855-9623 **FROM PREVIOUS EMPLOYER**
APPLICANT PLEASE SIGN AND DATE BOTTOM ONLY

TO: _____ FROM: _____
DATE: _____ FAX #: _____

This information is being requested by: (circle one) Phone Fax Mail

APPLICANTS NAME: _____ SS#: _____
has applied for employment with F & S Trucking for the position of _____ Applicant states that he/she was employed by your company from the dates of _____ to _____ (see release)

1. Are the employments dates correct as stated above? **Yes No** If no, correct dates are: _____
2. What type(s) of work did the applicant perform? _____
3. What type of equipment did the applicant operate? Straight truck _____ Bus _____
Tractor-Semi-trailer _____ Other (specify) _____
4. Number of Accidents, if any? _____ Number preventable? _____
5. Was this applicant's license to drive ever suspended while in your employ? **Yes No** If yes, explain _____

INFORMATION IS REQUIRED AND MUST BE COMPLETED PER DEPARTMENT OF TRANSPORTATION (DOT) REGULATIONS, SECTION 382.413

6. Within the last three (3) years was this person tested for controlled substances? **Yes No**
 - A. Did this applicant test positive? **Yes No**
 - B. Did this applicant have an alcohol test with a BAC of 0.04 or greater in the past two years? **Yes No**
 - C. Did this applicant refuse any alcohol or controlled substance test in the past two years? **Yes No**If yes, to any above, name the Substance Abuse Professional. _____
7. Why did this person leave your company? Laid off Resigned Discharged
8. Would you re-employ this person? **Yes No** If No, please explain _____

	EXCELLENT	GOOD	FAIR	POOR
Quality of work				
Safety Habits				
Conduct/Attitude				
Personal Habits				

This Reply is being provided by

(Authorized Signature) (Title) (Date)

I, hereby authorize F & S Trucking, with the right to investigate my background, prior work history, including an and all results from drug and alcohol testing (screening) in accordance with regulations of the Federal Highway Administration (FHWA), title 49, sections 382.405, 382.413, 383.35, 391.23, and 391.27. I hereby release all parties concerned from any and all liability of any type as a result of providing the requested information
(Applicants Signature) _____ (Date) _____ (witness) _____

AUTHORIZATION FOR BACKGROUND REPORTS

In connection with your application for employment with F & S Trucking, we may obtain one or more reports regarding your credit, driving, and/or criminal background history from a consumer reporting agency and/or other sources. If F & S Trucking uses any information it obtains from a background report in a decision to not hire you or to make any other adverse employment decision regarding you, F & S Trucking 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 a background report, F & S Trucking will notify you that the action has been taken and that the background report was the reason for the action. F & S Trucking cannot obtain background reports from consumer reporting agencies or other sources regarding you unless you consent in writing. If you agree that F & S Trucking may obtain such background reports, please read the following and sign below:

I authorize F & S Trucking to contact any organization or individual that I have listed on my employment application or resume or mentioned in job interviews and obtain from them any relevant information about my job qualifications, including my experience, skills, and abilities. 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, as well as any reference-related information about me held or known by my former employers, supervisors, and co-workers. In addition, I consent to the release of any information about my education, experience abilities, or work-related characteristics or traits held or known by other organizations or individuals, including schools and educational institutions, professional or business associates, and friends and acquaintances that F & S Trucking might contact in the course of conducting a reference check or background investigation of my suitability for employment.

I understand and acknowledge that this release of information can involve my qualifications, performance, credentials, or other characteristics or factors affecting my suitability for employment with F & S Trucking. Specifically, I am authorizing the release of any information about my performance, experience, capability, attitude, specific events, or other work-related characteristics that currently are in the possession of the requested organizations or their managers or representatives.

In exchange for F & S Trucking's consideration of my employment application, I agree not to file or pursue any complaints, claims, or legal actions of any kind against any organization or individual that provides work-related information about me to F & S Trucking or its agents in accordance with the terms and intent of this release. I also agree not to file or pursue any complaints, claims, or legal actions against F & S Trucking or any of its employees, representatives, or agents arising out of their efforts to obtain work-related information about me.

I have read the above Notice Regarding Background Reports provided to me by F & S Trucking and I understand that if I sign this consent form, F & S Trucking and/or any entity it retains to obtain such background reports may obtain reports of my credit, driving, and/or criminal background history in addition to information regarding my background, references, education, specific events, and past employment. I hereby authorize F & S Trucking and its employees, agents, and affiliates to obtain the information above. Date: Signature

Social Security Number

Name (Please Print)

License Number /License State

____/____/____
Date of Birth

Years of Experience

BELOW DISCLOSURE AND AUTHORIZATION LANGUAGES IS FOR MANDATORY USE BY ALL ACCOUNT HOLDERS
IMPORTANT DISCLOSURE REGARDING BACKGROUND REPORTS FROM THE PSP Online Service

In connection with your application for employment with F & S Trucking, 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 F & S Trucking uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, F & S Trucking 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, F & S Trucking 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 F & S Trucking uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, F & S Trucking 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 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 F & S Trucking who procured the report, then, within 3 business days of receiving your request, together with proper identification, F & S Trucking must send or provide to you a copy of your report and a summary of your rights under the Fair Credit Reporting Act.

Neither F & S Trucking nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. You may challenge the accuracy of the data by submitting a request to <http://dataqs.fmcsa.dot.gov>. If you challenge crash or inspection information reported by a State, FMCSA cannot change or correct this data. Your request will be forwarded by the DataQs system to the appropriate State for adjudication.

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) crashed where 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 Federal Motor Carrier Safety Regulations (FMCSR) violations that have been adjudicated by a court of law will also appear, and remain, on a PSP report. F & S Trucking cannot obtain background reports from FMCSA without your authorization.

AUTHORIZATION

If you agree that F & S Trucking may obtain such background reports, please read the following and sign below:

I authorize F & S Trucking 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 authorizing 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 F & S Trucking to decide regarding my suitability as an employee.

I further understand that neither F & S Trucking 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 <http://dataqs.fmcsa.dot.gov>. If I challenge crash or inspection information reported by a State, FMCSA cannot change or correct this data. I understand my request will be forwarded by the Data QS system to the appropriate State for adjudication.

I understand that any crash or inspection in which I was involved will display on my PSP report. Since the PSP report does not report, or assign, or imply fault, I acknowledge it will include all CMV crashes where I was a driver or co-driver and where those crashes were reported to FMCSA, regardless of fault. Similarly, I understand all inspections, with or without violations,

will appear on my PSP report, and State citations associated with FMCSR violations that have been adjudicated by a court of law will also appear, and remain, on my PSP report.

I have read the above Disclosure Regarding Background Reports provided to me by F & S Trucking and I understand that if I sign this Disclosure and Authorization, F & S Trucking may obtain a report of my crash and inspection history. I hereby authorize F & S Trucking and its employees, authorized agents, and/or affiliates to obtain the information authorized above.

Signature

Date

Name (Please Print)

NOTICE: This form is made available to monthly account holders by NIC 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 contained in this Disclosure and Authorization form to obtain an Applicant's consent. The language must be used in whole, exactly as provided. Further, the language on this form must exist as one joint stand-alone document or individually as two separate stand-alone documents, (i.e., one Disclosure form, and one Authorization form). The language may NOT be included with other consent forms or any other language.

