



## EMPLOYMENT APPLICATION COVER SHEET

### NOTICE TO APPLICANTS

**Equal Employment Opportunity Statement:** Russin Lumber Corp. is committed to providing an equal opportunity for all individuals seeking employment. The objective of Russin Lumber's hiring procedure is to select the most qualified individual for the job. In reading and answering the questions contained within the employment application, please keep in mind that none of the questions is intended to imply limitations, preference or discrimination based on age, gender, marital status, creed, color, national origin or the existence of a disability that does not interfere with the performance of the position for which you are applying.

### EMPLOYMENT APPLICATION—GENERAL INFORMATION AND INSTRUCTIONS

**Purpose of the employment application:** The purpose of the employment application is to give you the opportunity to provide Russin Lumber with information about you, your skills, experience, abilities and other personal attributes that meet the qualification requirements for the position for which you are applying. It is in your best interest to be thorough, accurate and descriptive in providing this information. A number of people will apply for the position that is available, and Russin Lumber does not guarantee any applicant an interview or consideration beyond the employment application.

**Responding to inquiries on the employment application:** All of the inquiries on the application must be completed thoroughly and accurately. If the question or information sought is not applicable, enter "N/A" for your response in the space provided. Failure to complete all sections may disqualify your application from further consideration. If additional space is required to adequately answer any question, you may write the information on the back page of the application.

### RUSSIN LUMBER EMPLOYMENT POLICIES AND PRACTICES

**Reference and information check:** You authorize previous employers and personal references to furnish Russin Lumber such information as it considers necessary to evaluate your qualifications for employment.

**Drug and Alcohol Test:** Our company policy on substance abuse requires that you submit to drug and alcohol screening, and successfully pass, with negative results, prior to employment. If you are considered for employment, part of the application process will include a urinalysis exam which is used to detect the use of drugs and alcohol. Employees who voluntarily terminate employment prior to complete the 60 month introductory period may be asked to reimburse the company for the expense of the physical exam and drug testing.

**I-9 Form documentation:** If Russin Lumber offers you an employment position, you must complete an I-9 form and provide documentation that shows you are authorized to work in the United States prior to commencing work. If you do not provide this documentation, you will no longer be considered qualified for the employment position.

**Employment at will doctrine:** Russin Lumber offers employment under the legal terms of the doctrine of "employment at will," which means that either the employee or the company is free to end the employment relationship at any time, with or without cause. Only the officers of the company may authorize contract of employment other than at will.

### **Applicant's Acknowledgement**

Your signature below presents that you have read and understand the notices, instructions and conditions set forth above. You also acknowledge that information reported on your application is accurate and true and you understand that false or misleading information in your application may result in immediate dismissal.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date



Driving Experience and Qualifications				
List all licenses held in the last three years				
	State	License No.	Type	Expiration Date
Driver's Licenses				

List all types of vehicles you are qualified to drive					
Vehicle Experience	Class of equipment	Type of Equipment (van, tank, flat, etc.)	To	From	Approximate number of miles driven
	<input type="checkbox"/> Straight Truck				
	<input type="checkbox"/> Tractor-trailer				
	<input type="checkbox"/> Tractor/two trailers				

List all traffic convictions (excluding parking tickets) and forfeitures for the last three years				
	Location	Date	Charge	Penalty
Traffic Convictions & Forfeitures				

List all accidents for the last three years (list the most recent first)				
	Dates	Nature of Accident	Fatalities	Injuries
Record of Accidents				

Have you ever been denied a license, permit or privilege to operate a motor vehicle? YES  NO  If yes, attach statement giving details.

Have you ever had a license, permit or privilege suspended or revoked? YES  NO  If yes, attach statement giving details.

If, while working for any other employer, you were subject to Department of Transportation testing Requirements:

1. Have you had an alcohol test with a result of 0.04 or higher alcohol concentration? YES  NO  If yes, attach statement giving details.

2. Have you had a verified positive drug test? YES  NO  If yes, attach statement giving details.

List any additional information, which may help us in our hiring decision (special experience, training not otherwise noted, and special awards):

References			
<i>Please, list three professional references.</i>			
Full Name:	Relationship/Company	Company	Contact information

Work Experience

Please, account for a minimum of the last 10 years beginning with your most recent position (include summer/seasonal employment, if applicable). Provide as much information as possible. If time gaps exist between jobs held, please explain your activities during that time. (Please use reverse side if additional space is required)

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO  
  Check if you were subject to FMCSR while employed by this employer

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO  
  Check if you were subject to FMCSR while employed by this employer

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO  
  Check if you were subject to FMCSR while employed by this employer

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO  
  Check if you were subject to FMCSR while employed by this employer

Disclaimer and Signature

I certify 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. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_