



APPLICATION FOR EMPLOYMENT

EARTH ENERGY, INC (EQUAL OPPORTUNITY EMPLOYER)

APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position Applied for:					
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	

EDUCATION

High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list 3 non-relatives whom you have known for at least one year.

Full Name		Relationship
Company		Phone ()
Address		
Full Name		Relationship
Company		Phone ()
Address		
Full Name		Relationship
Company		Phone ()
Address		

PREVIOUS EMPLOYMENT**PLEASE EXPLAIN ANY GAP IN EMPLOYMENT**

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 <input type="checkbox"/>	NO <input type="checkbox"/>
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 <input type="checkbox"/>	NO <input type="checkbox"/>
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 <input type="checkbox"/>	NO <input type="checkbox"/>

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

It is our policy not to discriminate against minorities or women with respect to recruitment, hiring, training, promotion and other terms and conditions of employment, provided the individual is qualified to perform the work available.

I certify that my answers 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

Attention CDL Drivers:

The DOT Drug & Alcohol Clearinghouse arrives January 6, 2020

What is it? An online database providing employers, licensing agencies, and enforcement officers with real-time information about truck and bus drivers who have violated DOT drug or alcohol testing rules. Employers must check the Clearinghouse when hiring each new CDL driver and every year for existing CDL drivers like you. The Clearinghouse will affect you in several ways:

- 1 You will need to register on the Clearinghouse website (available Fall 2019) in order to comply with item #2 below. Registration is optional unless you switch employers or have a DOT drug or alcohol violation. Registration will give you free access to your own Clearinghouse record.

clearinghouse.fmcsa.dot.gov

- 2 You will need to go to the Clearinghouse to grant electronic consent whenever your employer is required to purchase a full Clearinghouse report on you. You will not be allowed to continue operating a commercial motor vehicle (CMV) or perform other safety-sensitive duties if you refuse to grant this consent (§382.703(c)).

- 3 You will need to sign a separate consent form (annually or one-time) to allow your employer to obtain "limited" Clearinghouse reports that indicate whether there is information about you in the Clearinghouse (if there is, then a full report will be required -- see #2 above) (§382.701(b)).

- 4 If you commit any of the following DOT violations or complete any of the following steps after January 6, 2020, it will be reported to the Clearinghouse:

- Any verified positive, adulterated, or substituted drug test
- Any confirmed alcohol test result of 0.04 or higher
- Any refusal to submit to a DOT-required test
- Any verified and documented "actual knowledge" that you violated the drug/alcohol rules:
 - Any on-duty alcohol use, including any citation for DUI/DWI while driving a CMV
 - Any alcohol use within 4 hours before going on duty
 - Any alcohol use within 8 hours of an accident or before a post-accident test is complete (whichever occurs first)
 - Any prohibited drug use while on duty
- Successful completion of the return-to-duty process following treatment*
- Any negative return-to-duty test*
- Successful completion of follow-up testing*

**Only reported if the underlying violation occurred after January 6, 2020.*

- 5 You will be notified whenever information about you in the Clearinghouse is added, removed, or revised. You can specify how you want to be contacted when you register.

I hereby acknowledge receiving educational information about the CDL Drug & Alcohol Clearinghouse as required under §382.601(b)(12).

Driver's name: _____ Date: _____

Driver's signature: _____

PERSONAL DRIVING HISTORY

NAME: _____

DATE OF BIRTH: _____

DRIVERS LICENSE NUMBER: _____

HAVE YOU HAD ANY ACCIDENTS INVOLVING AN AUTOMOBILE IN THE LAST THREE (3) YEARS? IF SO, PLEASE EXPLAIN.

HAVE YOU HAD ANY DRIVING VIOLATIONS IN THE LAST THREE (3) YEARS? IF SO WHAT KIND AND APPROXIMATE DATE.

HAVE YOU EVER BEEN ARRESTED FOR DUI, OR REFUSED TO TAKE AN ALCOHOL TEST?

DO YOU HAVE A COMMERCIAL DRIVER'S LICENSE (CDL)? IF SO, WHAT CLASS?

ARE YOU REGISTERED ON THE DOT CLEARINGHOUSE?

(REGISTRATION IS FREE AND MUST BE COMPLETED WHEN ACCEPTING EMPLOYMENT WITH EARTH ENERGY. PLEASE SEE ADDITIONAL INFORMATION ATTACHED).

ATTACH A PHOTOCOPY OF YOUR DRIVER'S LICENSE.

I GIVE PERMISSION TO INVESTIGATE MY DRIVING RECORD AND UNDERSTAND THAT A GOOD DRIVING RECORD IS A CONDITION OF MY EMPLOYMENT.

(SIGNATURE)

(DATE)