#### **DRIVER'S** APPLICATION FOR EMPLOYMENT

Koch & Co., Inc.

Company \_

	Address	1809 No	orth St.						
	City	Seneca	St	ate <u>KS</u>	Zip _	66538			
		(8	answer all questions -	please print	)				
	are considered	with Federal and S d for all positions wi veteran status, non-	thout regard to ra	ce, color,	religion, sex,	national ori	gin, age,		
					Date of	application _			
Position(s) Ap	plied for								
NameLast	t	Firs	<u> </u>	Middle	_ Social Sec	urity No			
		for the past 3 years.	•	maaro					
Current Addre	•	To the past o yours.							
Current Addre	Street	A	,		City				
	State		Zip Code	Phone			How Long?_	vr/mo	
Previous Addresses	Ciaic	•	Zip Code				How Long?yr./mo.		
	Street		City		State & Zip Co	ode	, Flow Long: _	yr./mo.	
	Street		City		State & Zip Co		How Long?_	•	
	Street		City		State & Zip Co	ode	How Long?_	yr./mo.	
Do you have the	e legal right to work in	n the United States?							
Date of Birth _ (Required for Co	ommercial Drivers)		Can you p	rovide proof	of age?				
Have you work	ked for this compa	ny before?	Where?						
Dates: From .		To	Rate c	of Pay		Position _			
Reason for lea	aving								
Are you now e	employed?	If not, how long	since leaving last e	mployment	?				
Who referred	you?				Rate of pa	y expected			
Have you ever (Answer only if a j	r been bonded? ob requirement)				Name of b	onding com	pany		
Have you ever	r been convicted o	f a felony?							
If yes, please will be conside	explain fully on a sered.	separate sheet of pap	per. Conviction of a	crime is no	ot an automat	ic bar to emp	ployment-all cir	rcumstance	
Is there any attached job of		t be unable to perf	orm the functions	of the job	for which yo	ou have app	olied [as desc	ribed in th	
If yes, explain	n if you wish.								

#### **EMPLOYMENT HISTORY**

All driver applicants to drive in interstate commerce must provide the following information on all employers during the preceding 3 years. List complete mailing address, street number, city, state and zip code.

Applicants to drive a commercial motor vehicle\* in intrastate or interstate commerce shall also provide an additional 7 years' information on those employers for whom the applicant operated such vehicle. (NOTE: List employers in *reverse* order starting with the most recent. Add another sheet as necessary.)

EMPLOYER NAME			FROM: MO & YR	TO: MO & YR
ADDRESS			POSITION	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	Did you drive a vehice	cle requiring a CDL
REASON FOR LEAVING:			120	NO
EMPLOYER NAME			FROM: MO & YR	TO: MO & YR
ADDRESS			POSITION	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	Did you drive a vehice YES	cle requiring a CDL
REASON FOR LEAVING:			120	110
EMPLOYER NAME			FROM: MO & YR	TO: MO & YR
ADDRESS			POSITION	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	Did you drive a vehice	cle requiring a CDL
REASON FOR LEAVING:			 113	NO
EMPLOYER NAME			FROM: MO & YR	TO: MO & YR
ADDRESS			POSITION	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	Did you drive a vehice YES	. •
REASON FOR LEAVING:				
EMPLOYER NAME			FROM: MO & YR	TO: MO & YR
ADDRESS			POSITION	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	Did you drive a vehic	
REASON FOR LEAVING:			YES	NO

<sup>\*</sup>Includes vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 15 or more passengers, or any size vehicle used to transport hazardous materials in a quantity requiring placarding.

	DATES  NATURE OF ACCIDENT (HEAD-ON, REAR-END, UPSET, ETC.)				FATALITIES	INJURIES	
AST ACCIDEN	Γ						
IEXT PREVIOU	s						
IEXT PREVIOU	s						
AFEIC CONVIC	TIONS AND EODE	EITH IDES FOR THE DAS	T 3 VEADS //	THED THAN E	MPKING VIOL	ATIONS) IE NOA	IE WOITE NOME
AFFIC CONVIC	AFFIC CONVICTIONS AND FORFEITURES FOR THE PAST LOCATION				HARGE	LATIONS) IF NON	PENALTY
	-						
		(ATTACH S	HEET IF MOI	RE SPACE IS N	EEDED)		
			EDUC	ATION			
HEST GRADE	COMPLETED: GRA	ADE SCHOOL			L:	COLLEC	GE:
ST SCHOOL AT	TENDED	NAME)				(CITY)	
	(1)	NAME)				(0111)	
		EXPERIENCE	E AND QUA	LIFICATIONS	- DRIVER		
	STATE	LICENSE NO.		TYPE		EXP	RATION DATE
DRIVER							
LICENSES							
Have you eve	r been denied a licer	nse, permit or privilege to	operate a m	otor vehicle?		YES	NO
Has any licen	se, permit or privileg	e ever been suspended	or revoked?			YES	NO
		OR B IS YES, GIVE DETA					
	VERTO ETTILATIVO	511 5 10 120, aive 52 //					
WWW EVDE	DIENOS IENONE						
	RIENCE IF NONE,	TYPE OF EQUI	PMENT		DATES		APPROX, NO. OF M
CLASS	OF EQUIPMENT	(VAN, TANK, FLA		FROM		то	(TOTAL)
	ск						
TRAIGHT TRU							
	SEMI-TRAILER				1		
RACTOR AND	SEMI-TRAILER						
RACTOR AND							
RACTOR AND	OTRAILERS						
RACTOR AND RACTOR - TWO MOTORCOACH DTHER	O TRAILERS						

WHICH SAFE DRIVING AWARDS DO YOU HOLD AND FROM WHOM?

#### **EXPERIENCE AND QUALIFICATIONS - OTHER**

SHOW ANY TRUCKING, TR	RANSPORTATION	OR OTHER	REXPERI	ENCE THAT MAY HELP	IN YOUR WO	RK FOR THIS COMPANY		
LIST COURSES AND TRAI	NING OTHER THA	N SHOWN	I ELSEWH	ERE IN THIS APPLICAT	FION	No. of the second secon		
LIST SPECIAL EQUIPMEN	T OR TECHNICAL	MATERIAL	_S YOU C	AN WORK WITH (OTHE	R THAN THO	SE ALREADY SHOWN)		
				-				
and complete to the blauthorize you to ma and other related m regarding medical hi I hereby release em inquiries and releasin	pest of my knowake such invest atters as may astory will be r ployers, school g information i	was cor wledge. tigations be ned nade or ols, heal n conne	npleted and in cessary ly if an th care ction wi	quiries of my pers in arriving at an dafter a condition providers and other my application.	all entries onal, empl employm nal offer of ner person	on it and information in it are true oyment, financial or medical history ent decision. (Generally, inquiries f employment has been extended.) is from all liability in responding to on given in my application or intercide by all rules and regulations of		
Date						Applicant's Signature		
			PR	OCESS RECORD				
APPLICANT HIRED				REJECTED _				
DATE EMPLOYED				POINT EMPLO	POINT EMPLOYED			
DEPARTMENT(IF REJECTED, SUMMARY RE	PORT OF REASONS SUPERIOR	SHOULD BE THIS S	PLACED IN	O BE FILLED IN BY RE COMPANY REPRESE	SPONSIBLE	WRITTEN RECORD ON FILE		
1. APPLICATION 2. INTERVIEW 3. PAST EMPLOYMENT 4. WRITTEN EXAM 5. ROAD TEST 6. CRIMINAL AND TRAFFIC CONVICTIONS			TAIN	BELOW AVENAGE	FOOR	WAITTEN RECORD ON FILE		
SIGNATUR	E OF INTERVIEWING	OFFICER						
			<u>.</u>	TRANSFERS				
FROM: TO:  DATE:  REASON FOR TRANSFER			DATE:	FROM: TO:				
FROM: TO:  DATE:  REASON FOR TRANSFER			DATE:	DATE:				
		TE	RMINA	TION OF EMPLOY	MENT			
DISMISSED		_ VOLUN	TARILY Q	JIT	OTHER .			
TERMINATION REPORT PI	LACED IN FILE _			SUPERVISOR _				

## **Application** For Employment

### Koch & Company., Inc

1809 North Street, Seneca KS 66538 PH:800-540-5624 Fax:785-336-2638 E:mail: hr@kochandco.com

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion or national origin.

## (PLEASE PRINT)

		(I DELIGE	1 1 1 1 1			
Last Name	First 1	Name	M	liddle Name		
Address Number	Street	City	S	State		Zip Code
Telephone Number(s)						
Home Phone:		Cell Phone:		E-mail:		
•	18 years of age, ca	n you provide	required			
proof of your el	igibility to work?				$\square$ Yes	$\square$ No
Have you ever f	ïled an application	with us before?		give date	□ Yes	□ No
Have you ever b	oeen employed with	us before?	If Yes,	give date _	□ Yes	□ No
Are you current	ly employed?				□ Yes	$\square$ No
May we contact	your present empl	oyer?			□ Yes	$\square$ No
country because	ted from lawfully be of Visa or Immigr	ation Status?			□ Yes	□ No
On what date w	ould you be availat	ole for work?		_		
Are you availab	available to work: $\Box$ Full Time $\Box$ Part Time $\Box$ 1 <sup>ST</sup> Shift $\Box$ 2 <sup>nd</sup> Shift					orary
Are you current	ly on "lay-off" stat	us and subject t	to recall?		□ Yes	$\square$ No
	convicted of a felon not necessarily disqualify an appl		st 7 years?		□ Yes	$\square$ No
If Yes, please ex	xplain					
Referred By						

### **Education**

\_\_\_\_\_

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills, and extra curricular activities.

## References

1	(Name)	_(	)	Phone # )
2	(Address) (Name)	_(	)	Phone # )
3	(Address) (Name)	_(	)	Phone # )
	(Address)			•

# Employment Experience - List below last four employers, starting with last one first 1.

Employer		Dates En	nployed	W. I. D. C.	
		From	То	Work Performed	
Address					
Telephone Number(s)		Hourly ra	te/salary		
		Starting	Final		
Job Title	Supervisor				
Reason for Leaving					
2.					
Employer		Dates En		Work Performed	
		From	То	Work I criorincu	
Address					
Telephone Number(s)		Hourly ra	te/salary		
	T	Starting	Final		
Job Title	Supervisor				
Reason for Leaving					
_					
2					
3.		Dotos Ev	umlawad		
Employer		Dates Er		Work Performed	
Employer		Dates Er From	nployed To	Work Performed	
				Work Performed	
Employer  Address		From	То	Work Performed	
Employer		From Hourly ra	To te/salary	Work Performed	
Employer  Address  Telephone Number(s)	Supervisor	From	То	Work Performed	
Employer  Address	Supervisor	From Hourly ra	To te/salary	Work Performed	
Employer  Address  Telephone Number(s)  Job Title	Supervisor	From Hourly ra	To te/salary	Work Performed	
Employer  Address  Telephone Number(s)	Supervisor	From Hourly ra	To te/salary	Work Performed	
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving	Supervisor	From Hourly ra	To te/salary	Work Performed	
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving	Supervisor	Hourly ra Starting	te/salary Final	Work Performed	
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving	Supervisor	Hourly ra Starting  Dates Er	te/salary Final	Work Performed  Work Performed	
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving  4.  Employer	Supervisor	Hourly ra Starting	te/salary Final		
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving	Supervisor	Hourly ra Starting  Dates Er	te/salary Final		
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving  4.  Employer  Address	Supervisor	Hourly ra Starting  Dates Er From	te/salary Final  nployed To		
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving  4.  Employer	Supervisor	Hourly ra Starting  Dates Er From  Hourly ra	te/salary Final  nployed To  te/salary		
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving  4.  Employer  Address	Supervisor	Hourly ra Starting  Dates Er From	te/salary Final  nployed To		
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving  4.  Employer  Address  Telephone Number(s)		Hourly ra Starting  Dates Er From  Hourly ra	te/salary Final  nployed To  te/salary		
Employer  Address  Telephone Number(s)  Job Title  Reason for Leaving  4.  Employer  Address  Telephone Number(s)		Hourly ra Starting  Dates Er From  Hourly ra	te/salary Final  nployed To  te/salary		

#### **Applicant's Statement**

I hereby certify that all information I have provided is true, complete, and correct to the best of my knowledge and that any false or misleading information provided during the application or interview process may result in my immediate elimination for consideration for employment or discharge (if hired), regardless of when discovered.

I expressly authorize, without reservation, Koch & Co., Inc., its representatives, employees or agents to contact and obtain information from all references (personal and professional), employees, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding employer, its agents, employees or representatives, for seeking, gathering and utilizing information in the employment decision process.

I hereby authorize all references (personal and professional), employers, public agencies, licensing authorities and education institutions to release any and all information requested by Koch & Co., Inc., its representatives, employees or agents, regarding my previous employment, education and job-related activities, whatever they may be.

Additionally, I hereby authorize Koch & Co., Inc. to supply my employment record, in its sole discretion, in whole or in part to any prospective employer, government agency, or other party, that Koch & Co., Inc. deems appropriate.

I understand that Koch & Co., Inc. does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not received correspondence from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I certify that I have read, fully understood and accept all terms of the foregoing "Applicant's Statement".					
Signature of Applicant	Date				

#### **Background Check: Authorization and Release of DMV Records**

The position I am applying for is a Category Class A CDL Driving position.

(To be completed by Human Resources)

I understand that driving a Company vehicle (or my own vehicle, as required) is a requirement of the position I am being considered for and that having and maintaining a satisfactory driving record is a condition of my employment. I agree to allow Koch and Company Inc., to check my driving record prior to hire and to check it periodically thereafter. I further agree to report any license suspensions, serious accidents or offenses, or any other condition to my supervisor immediately that may affect my ability to drive a Koch and Co Inc., vehicle (or my own vehicle, if I am required to drive) after I am hired. I agree to obtain a Driver's license prior to hire if I do not already have one.

I understand that the Company will use this information for employment purposes only and not furnish this information to a third party without my written consent.

I agree to release Koch and Co Inc., its employees and those who supplied you with the information from any liability for any damage which may result from furnishing the requested information or my failure to be hired for the position for which I am applying.

Print Name	Date of Birth
Driver's License Number	State of License
Signature	 

# FOR PERSONNEL DEPARTMENT USE ONLY Position(s) Applied For Is Open: $\square$ Yes $\square$ No Department (Job Description):\_\_\_\_\_ Supervisor: Cabinets \_\_\_\_\_ Division: Doors Hiawatha \_\_\_\_\_ Starting Wage \_\_\_\_\_ Date:\_\_\_\_\_ Interviewed by Application Reviewed by \_\_\_\_\_ \_\_\_\_ **Notes:**