



APPLICATION FOR EMPLOYMENT

A DRUG FREE WORKPLACE AN EQUAL OPPORTUNITY EMPLOYER

Mailing Address: 2360 Lindbergh Street, Auburn CA 95602 Phone: 530-885-0401 FAX: 530-885-5851

No team member, applicant, or candidate for promotion, training or other advantage (shift scheduling, premium pay work, vacation scheduling, and any other employment activity) shall be discriminated against (or given preference) because of race, color, religion, sex, age, physical disability, veteran status, or national origin.

Your application for employment will be processed as quickly as possible. Public Law 91-508 requires that we advise you that a routine inquiry may be made during our initial or subsequent processing which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon your written request, additional information as to the nature and scope of the inquire (if one is made) will be provided to you. This application will have an active period of thirty (30) days. You must re-apply for any position that becomes open after the active period of this application.

NAME (PRINT) FIRST MIDDLE LAST

Phone Numbers Date of Birth Social Security Number

PAST 3 YEAR RESIDENCY Use additional sheet if necessary

PRESENT ADDRESS STREET CITY STATE ZIP LENGTH AT ADDRESS

PREVIOUS ADDRESS STREET CITY STATE ZIP LENGTH AT ADDRESS

PREVIOUS ADDRESS STREET CITY STATE ZIP LENGTH AT ADDRESS

POSITION APPLIED FOR ARE YOU OVER 18? ARE YOU EMPLOYED NOW? HAVE YOU EVER WORKED FOR THE COMPANY BEFORE?

REFERRED BY NAMES OF FRIENDS OR RELATIVES EMPLOYED BY THIS COMPANY

IN CASE OF EMERGENCY NOTIFY: NAME ADDRESS TELEPHONE

IF HIRED, DO YOU HAVE A RELIABLE MEANS OF TRANSPORTATION TO WORK? YES NO

CAN YOU, UPON EMPLOYMENT, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THIS COUNTRY? YES NO

EDUCATION (CIRCLE HIGHEST GRADE COMPLETED) HAVE YOU BEEN CONVICTED OF A CRIME? (IN ANSWERING THIS QUESTION, DO NOT INCLUDE CONVICTIONS IN EXCESS OF TWO YEARS OLD RELATING TO POSSESSION OR USE OF AN OUNCE OR LESS OF MARIJUANA, NOR ANY MISDEMEANOR CONVICTION FOR WHICH PROBATION HAS BEEN COMPLETED.)

PERSONAL REFERENCES DO NOT INCLUDE RELATIVES OR FORMER EMPLOYERS

NAME ADDRESS PHONE (Three rows for references)

RELATIVES WHO HAVE KNOWN YOU EXTREMELY WELL LIST 2

NAME ADDRESS PHONE (Two rows for relatives)

EMPLOYMENT HISTORY

LIST EACH JOB HELD. Start with your present or last job. The Department of Transportation requires that employment for at least three years and/or Commercial driving experience for the past 10 years be shown.

EMPLOYER	PHONE NUMBER ()	WORK PERFORMED, BE SPECIFIC
ADDRESS		
TYPE OF BUSINESS	DATES OF EMPLOYMENT (FROM - TO)	
YOUR JOB TITLE	PAY RATE/SALARY	
SUPERVISOR'S NAME	REASON FOR LEAVING	
Were you subject to the FMCSR's*** while employed? Yes <input type="checkbox"/> No <input type="checkbox"/>		Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR part 40? Yes <input type="checkbox"/> No <input type="checkbox"/>

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Explain any gaps in employment

***The Federal Motor Carrier Safety Regulations (FMCSRs) apply to anyone operating a motor vehicle on a highway in interstate commerce to transport passengers or property when the vehicle: (1) weighs or has a GVWR of 10,001 pounds or more, (2) is designed or used to transport 9 or more passengers, OR (3) is of any size and is used to transport hazardous materials in a quantity requiring placarding.

DRIVING EXPERIENCE/QUALIFICATIONS

Driver Licenses

State	License No.	Type	Expiration Date

Equipment Experience

	Type Van, Tank, Flat, etc.	Dates From - To	Approximate No. of miles Total
Straight Truck			
Tractor and Semi-Trailer			
Tractor - Two Trailers			
Other			

Accident Record (Past 3 years) attach additional sheet if necessary

	Dates	Nature of accident	Fatalities and/or Injuries
Last accident			
Next previous			
Next previous			

Traffic violations, convictions and/or forfeitures for the past 3 years (other than parking violations)

Location	Date	Charge	Penalty

Have you ever been denied a license, permit, or privilege to operate a motor vehicle?

Yes _____ No _____

Has any license, permit or privilege ever been suspended or revoked?

Yes _____ No _____

If the answer is yes to either A or B, give details below

Have you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years? YES _____ NO _____

General Job Description

Listed below are the general responsibilities and physical demands of being employed by Nella Oil Company. A job description specific to the position for which you are applying will be provided to you. It will contain the essential duties for the position. Other duties may be assigned as needed by your supervisor.

General Responsibilities

1. Loads and Unloads tanker truck with petroleum products within Company and facility guidelines.
2. Operates semi-truck with one or more trailers according to Company policies and state/federal laws.
3. Maintains vehicle cleanliness and performs minor maintenance as needed on vehicles
4. Work in a "SAFE" manner at all times and report all accidents immediately.
4. Ability to read and comprehend instructions, correspondence, and memos.
5. Ability to calculate figures and perform general mathematic functions.
6. Ability to apply common sense understanding to carry out instructions furnished in written, oral, or diagram form.
7. **PHYSICAL DEMANDS:** The physical demands described here are representative of those that must be met by a team member to successfully perform the essential functions of this job. Reasonable accommodations may be made enable individuals with disabilities to perform the essential functions. While performing the duties of this job, the team member is regularly required to stand, walk, sit, read, and hear. The team member is regularly required to sit in a trailer cab for long periods of time. The team member is regularly required to reach with hands and arms, climb or balance, stoop kneel, crouch, or crawl. The team member must regularly lift and/or move hoses and fittings that weigh up to 50 pounds. Specific vision abilities required by this job include close vision, distance vision, peripheral vision and the ability to focus. Team Member must possess a high degree of attention and considerable dexterity in the control of a tractor trailer/bobtail as to prevent damage to property and vehicle equipment.
8. **WORK ENVIRONMENT:** The work environment characteristics described here are representative of those a team member encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.
9. **CONFLICT OF INTEREST:** The team member must avoid all situations that may create a conflict of interest, including outside employment in a similar business.
10. **HARASSMENT:** The team member must perform his/her duties in a manner that is free from unlawful harassment.

Have you received and read a job description for the position for which you have applied?	Yes _____	No _____
Are you able to perform all of the duties shown above and in the job description of the job for which you are applying?	Yes _____	No _____

If no, explain:

APPLICANT CERTIFICATION, AUTHORIZATIONS, AND UNDERSTANDINGS

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document or statement used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize Nella Oil Company to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment as required by 49 CFR 391.23(d), (e) and (i). I further authorize my former employers to disclose to the company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers, and all others persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. I also understand that I have the right to review information provided by previous employers, have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and have a rebuttal statement attached to the alledged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

I understand that nothing contained in the application or conveyed during any interview which may be granted is intended to create an employment contract between myself and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by the General Manager.

I understand that if I am offered a position, that my employment is conditioned upon the successful completion of a drug test. In addition, I understand that should I refuse a request, tamper with a positive specimen, or receive a positive test result, I will be ineligible for employment.

I also understand that should I be employed by the Company, I agree that any disputes or claims relating to my employment with the Company shall be barred unless either a request for arbitration is submitted pursuant to Company policy, or filed no later than twelve (12) months after the first act, occurrence or omission upon which such dispute or claim is based. I agree that such a twelve (12) month period is reasonable and sufficient time for me to investigate and act upon any such claim or dispute. This provision shall survive any termination of my employment by the Company.

DATE

SIGNATURE OF APPLICANT