

# INGRAM READYMIX, INC.

## PRE-EMPLOYMENT PACKET

**\*\*\*APPLICATIONS MUST BE APPROVED BY HUMAN RESOURCES DEPARTMENT OR SAFETY DIRECTOR BEFORE APPLICANT IS OFFERED A POSITION. \*\*\***

**ALL PAGES OF PRE-EMPLOYMENT PACKET (1-4) MUST BE GIVEN TO APPLICANT FOR COMPLETION/REVIEW.**

- **United States Work Eligibility/ E-Verify Information Sheet for applicants review (page 1)**
- **Employment Application (page 2)**
- **Employment History (page 3)**
- **Fair Credit Act Disclosure and Authorization (page 4)**
- **Release of Information from Department of Transportation regulated Drug and Alcohol (page 4)**

**PLEASE SEND COMPLETED PACKET AND TWO FORMS OF IDENTIFICATION TO CORPORATE OFFICE FOR REVIEW.**

---

### UNITED STATES WORK ELIGIBILITY

Federal Law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States. Upon employment, and after completion of the I-9, Ingram Readymix, Inc. will use E-Verify to verify with the Social Security Administration (SSA) and the Department of Homeland Security (DHS) that each employee has authorization to work in the United States. If the Government cannot confirm that you are authorized to work, we will provide you with written instructions and an opportunity to contact SSA and/or DSHS in accordance with the E-Verify Memorandum of Understanding.

# INGRAM READYMIX, INC. EMPLOYMENT APPLICATION

DATE: \_\_\_\_\_ PLANT SUBMITTING APPLICATION: \_\_\_\_\_

APPLICANT INFORMATION				
NAME	FIRST	MIDDLE	LAST	
PHYSICAL ADDRESS	STREET ADDRESS	APT #	CITY	STATE ZIPCODE
CONTACT INFORMATION	CELL #	HOME #	EMERGENCY CONTACT (NAME, PHONE #, RELATIONSHIP)	

(v) CHECK ALL POSITIONS APPLYING FOR:								
MIXER (A/B)	HAULER (A)	TANKER (A)	BELLY DUMP (A)	LOADER	YARDWORKER	CHIPPER	MECHANIC	OTHER

(v) CHECK ALL PLANTS YOU ARE WILLING TO WORK AT (TRANSFERRING TO ANOTHER PLANT IS LIMITED)				
	BANDERA #19	DEL RIO #4	LAREDO #11	SA3 #21 (WEST)
	BLANCO #23	DEVINE #5D	MARBLE FALLS #9	SA4 #22 (NE)
	BOERNE #7	FREDERICKSBURG #1	NEW BRAUNFELS #2	SAN MARCOS #13
	BULVERDE #20	GONZALES #24	PEARSALL #5P	SEGUIN #3
	CONVERSE #12	GREGORY #25	PLEASANTON #8	SEGUIN SHOP #85
	CONVERSE SHOP #90	HONDO #5H	SA1 #14 (NW)	VICTORIA #6
	CORPUS CHRISTI#17	KERRVILLE #18	SA2 #15 (SOUTH)	
	HOUSTON #32 -HOCKLEY	HOUSTON #33 -CONROE	HOUSTON #34-BEAUMONT	

DRIVERS LICENSE INFORMATION				
	STATE	LICENSE #	TYPE (CLASS A, B, C)	EXPIRATION
<b>!!!MONTH/YEAR YOU RECEIVED YOUR CDL!!!</b>				

EXPERIENCE & QUALIFICATIONS					
	TYPE OF TRUCK(S) DRIVEN (CHECK ALL BOXES THAT APPLY):	YEARS/MONTHS EXPERIENCE:	FROM	TO	# OF MILES
	HAUL TRUCK DRIVER				
	MIXER TRUCK DRIVER				
	TANKER TRUCK DRIVER				
	OTHER (LIST ALL TRUCKS DRIVEN):				

PLEASE CIRCLE THE CORRECT ANSWERS BELOW AND GIVE DETAILS IF NEEDED			
HAVE YOU EVER WORKED FOR INGRAM READYMIX, INC?	NO	YES	PROVIDE YEAR/PLANT
HAVE YOU EVER TESTED POSITIVE OR REFUSED A DRUG OR ALCOHOL TEST?	NO	YES	PROVIDE YEAR AND SUBSTANCE POSITIVE FOR
HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A TRAFFIC VIOLATION?	NO	YES	(PROVIDE DATE, NATURE OF CRIME, COUNTY OF OFFENSE)

ACCIDENT RECORD FOR LAST 3 YEARS (ATTACH ADDITIONAL PAGES IF NEEDED)						
ACCIDENT DATE (LIST MOST RECENT 1ST)	COMMERICAL VEHICLE	CITATION	ACCIDENT DETAILS	# OF FATALITIES	# OF INJURIES	
	YES NO	YES NO				
	YES NO	YES NO				
	YES NO	YES NO				

# EMPLOYMENT HISTORY

The U.S. Department of transportation requires that all drivers show all employment for the past (3) three years. They must also show commercial driver employment for the seven (7) years immediately preceding the three (3) year period (total of ten years employment record) Sub-Section 391.21 (b)(10), (11).

CURRENT EMPLOYER				
COMPANY NAME		COMPANY PHONE	COMPANY FAX	
PHYSICAL ADDRESS	STREET ADDRESS      APT #	CITY	STATE	ZIPCODE
POSITION HELD		SALARY	START DATE	END DATE
REASON FOR LEAVING				
1 <sup>ST</sup> PREVIOUS EMPLOYER				
COMPANY NAME		COMPANY PHONE	COMPANY FAX	
PHYSICAL ADDRESS	STREET ADDRESS      APT #	CITY	STATE	ZIPCODE
POSITION HELD		SALARY	START DATE	END DATE
REASON FOR LEAVING				
2 <sup>ND</sup> PREVIOUS EMPLOYER				
COMPANY NAME		COMPANY PHONE	COMPANY FAX	
PHYSICAL ADDRESS	STREET ADDRESS      APT #	CITY	STATE	ZIPCODE
POSITION HELD		SALARY	START DATE	END DATE
REASON FOR LEAVING				
3 <sup>RD</sup> PREVIOUS EMPLOYER				
COMPANY NAME		COMPANY PHONE	COMPANY FAX	
PHYSICAL ADDRESS	STREET ADDRESS      APT #	CITY	STATE	ZIPCODE
POSITION HELD		SALARY	START DATE	END DATE
REASON FOR LEAVING				

I certify I have read and understood all of this employment application. It is agreed and understood that the employer of his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

APPLICANT SIGNATURE	DATE
---------------------	------

# FAIR CREDIT REPORTING ACT DISCLOSURE AND AUTHORIZATION

<b>FIRST NAME</b>	<b>MIDDLE</b>	<b>LAST NAME</b>	<b>DATE OF BIRTH</b>
<b>SOCIAL SECURITY</b>	<b>DRIVERS LICENSE</b>	<b>CLASS</b>	

As an applicant or during the course of your employment with Ingram Readymix, Inc., you are a “consumer” with rights under the Fair Credit Reporting Act (FCRA). This Disclosure and Authorization is provided to summarize your rights under the FCRA and to confirm your consent to allow Ingram Readymix, Inc. to obtain information regarding your credit history and possibly other information on your background such as your motor vehicle records and any criminal records for the purpose of considering you for employment or for continued employment.

**PLEASE NOTE: THIS AUTHORIZATION IS TO OBTAIN THE FOLLOWING:**

- Your Credit Records
- Your employment records
- Records concerning any driving under DOT Sec. 391.23, an assessment of your insurability under the company’s insurance coverage, criminal history, social security, medical records & drug testing.
- (For truck drivers only) In accordance with the Department of Transportation Motor Carrier Safety Regulations, Section 382.413, information concerning alcohol and controlled substances for the past 2 years
- Verification of your academic and/or professional credentials; and information and/or copies of documents from any military service records.

The FCRA gives you specific rights designed to promote accuracy and fairness in consumer reports as well as privacy of information that is to be used only for permitted purposes. Motor vehicle records and criminal background checks are “consumer reports”. The FCRA permits Ingram Readymix, Inc., to obtain a consumer report from a consumer reporting agency for the purpose of (1) considering your application for employment; (2) making a decision whether to offer you employment (3) deciding whether to continue your employment, if you have already been hired; or (4) making other employment decisions related directly to you. The only consumer reports Ingram Readymix, Inc. will consider in making such decisions are your credit reports and possibly motor vehicle records and your criminal background checks.

Generally, your rights under the FCRA include (1) your right to be told if information from a consumer report is being used against you, together with contact information about the consumer report being used against you, together with contact information about the consumer reporting agency that provided the report; (2) your right to find out what is in your file with the consumer reporting agency, including who has requested information from your file; (3) your right to dispute inaccurate information with the consumer reporting agency; (4) your right to seek damages from violators of the FCRA. You may request, in writing, additional disclosures regarding the nature and scope of any investigation requested and a written summary of your rights under the FCRA.

**By signing below, I \_\_\_\_\_, hereby voluntarily authorize** the COMPANY to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions concerning my employment with the COMPANY. I understand that the COMPANY may obtain such reports at various times throughout my employment for the purpose set forth above in this disclosure, including the evaluation of my eligibility for employment or continued employment. I understand that I have rights under the Fair Credit Reporting Act and acknowledge receipt of the Disclosure set forth above.

<b>APPLICANT SIGNATURE</b>	<b>DATE</b>
----------------------------	-------------

## “Release of Information Form -- 49 CFR Part 40 Drug and Alcohol Testing”

**By signing below, I \_\_\_\_\_, hereby voluntarily authorize** release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer, listed in *Section I-B*, to the employer listed in *Section I-A*. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released in *Section II-A* by my previous employer, is limited to the following DOT-regulated testing items:

- Alcohol tests with a result of 0.04 or higher
- Verified positive drug tests
- Refusals to be tested
- Other violations of DOT agency drug and alcohol testing regulations;
- Information obtained from previous employers of a drug and alcohol rule violation;
- Documentation, if any, of completion of the return-to-duty process following a rule violation.

<b>APPLICANT SIGNATURE</b>	<b>DATE</b>
----------------------------	-------------