

APPLICATION FOR EMPLOYMENT



*JMF Underground INC. consider applicants for all positions as a equal opportunity employer. All Positions within JMF are Safety Sensitive under FMCSA & PHMSA, Accordingly JMF Underground INC. maintains a "Drug and Alcohol Policy", "Harassment Policies", and a "HSE Policy", consistent with generally accepted workplace practices regarding these matters. Upon request, you may review a copy of each policy before completing this application. Continuing employment requires that you achieve and maintain all licenses and individual bonds required by JMF Underground INC. You agree to provide JMF Underground INC. documentation evidencing said licenses, and immediately update such documentation as the licenses expire or renew. **Any misrepresentation in this application and/or attachments may cause your application to be rejected, your name to be removed from the eligible register.***

GENERAL INFORMATION

- 1 **Please read the minimum requirements for the job.**
- 2 Type or print applications in blue or black ink.
- 3 Remember to sign and date your employment application and submit a copy of your driver's license and SS Card.
- 4 Background record checks may be run on all applicants not currently employed with JMF Underground.
- 5 **The following information is required for record checks to be run: SSNO, birth date, driver's license and state in which it was issued, city and state of every employer.**
- 6 Once submitted, your application and attachments will not be returned, reused or copied for you.
- 7 Feel free to submit any credentials, certificates and resumes with this application.

MINIMUM REQUIREMENTS

- 1 Employee shall be required to pass pre-employment drug screening and submit to random drug screenings.
- 2 Employee shall be required to pass a DOT physical and maintain a valid medical card at all times
- 3 Employee shall have the ability to lift and carry up to 75lbs.
- 4 Employee shall have the ability to bend, stoop, and twist continuously throughout the day.
- 5 Employee shall have the ability to work in extreme changing climates and temperatures.
- 6 Employee must be willing to work over 40 hours per week if needed.
- 7 Employee may be asked to travel with the company, stay out of town, and work weekends if needed.
- 8 Employee must have a reliable form of transportation.
- 9 Employee shall be required to work with others, as well as on their own.
- 10 Employee may be required to drive a combination truck and trailer.

Thank you for your interest in employment with JMF Underground INC. and good luck in your employment search.

_____ Initials _____ Date

**** Please read employment application instructions before completing this form****



Personal Information

Can you pass a Drug Test? (Including Medical Marijuana)		Yes	No
Do you have a valid driver's license?		Yes	No
Last Name:	First:	Middle:	Social Security Number:
Phone:		Email Address:	
Addresses of Residency for the past 3 Years:			
Current Address:			
Street	City	State	Zip
Previous Address:			
Street	City	State	Zip
Previous Address:			
Street	City	State	Zip
Date of Birth:			
Driver's License Number:	State	Expiration	
Have you ever had a valid license or permit suspended or revoked? If yes explain			
Emergency Contact Name:	Relationship:	Emergency Contact Number:	
How many hours can you work per week?		Do you need to leave work by a specific time?	
Are you able to work weekends?		(1 weekend per month may be mandatory depending on workload)	
Do you have issues with working out of town?			
Do you have consistent transportation?		How did you learn of our organization?	
What is your desired salary / Hourly Rate?		Are you currently employed?	
If hired, would you be able to perform the essential tasks of the job per the min requirements?			
Do you have any concerns with working in an outdoor setting? IE Bee Allergies, ect:			



Education History

School	Name and Location	Years Attended
High		
Trade School		
College		
Military		
Branch of Service	Period of Active Duty (Month & Year) From To	
Describe your duties and any special training		

Employment History – All applicants must provide the following information on all employers during the preceding 3 years. Applicants to drive a commercial motor vehicle shall also provide an additional 7 years information on those employers for whom the applicant operated such vehicle.

Company Name	Telephone
Address	Position Held
Name of Contact	Pay Rate
Were you subject to FMCR's while Employed? YES NO	Dates of Employment
Were your job designated as a safety-sensitive function in any DOT-regulated mode subject to drug and alcohol testing requirements of 49 CRF Part 40? YES NO	
Describe your Work	
Reason for Leaving	
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Describe your Work	
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We may contact the employers listed above unless you indicate those you do not want us to contact.	Do not contact Employer Number(s) _____



Please add any other personal qualifications or Professional Achievements (OSHA Certifications, First Aid, Relevant work experience, prior exceptional work:
Why should we hire you?

CONDITIONS OF EMPLOYMENT STATEMENT

Under penalties of perjury, I declare that my answers to the questions on this application and any necessary examinations and supplements are true and give JMF UNDERGROUND INC. the right to investigate all information given and to secure additional appropriate information if necessary. I understand that an investigative report may be made from information obtained through personal interviews with others. I understand that this inquiry may include information as to my personal characteristics, employment verification, credential verification, personal identity verifications, reference checks, criminal records, motor vehicle records, and appropriateness for employment. In accordance with the law and my understanding of this statement, I authorize my current and former employers to give any information regarding my employment, together with all information regarding me, and hereby release from all liability or responsibility all persons, companies, or corporations furnishing such information in good faith. I understand that the completion of this application does not assure me of a position with JMF UNDERGROUND INC. and does not obligate JMF UNDERGROUND INC. to me in any way. **I further understand that any misrepresentation herein may cause my application to be rejected, my name to be removed from the eligible register.** Candidates selected for hire may be required to pass a physical and drug screen prior to employment. I am aware that the results will be made available to the CEO or a duly authorized representative. I understand that this application, and attachments become a part of JMF UNDERGROUND INC.'s records and will not be returned, reused or copied for me once submitted. I understand that JMF UNDERGROUND INC. will not use, give or sell my information to any party and that all parts of this document are considered private.

By my signature, I certify, authorize and acknowledge the above statements:

SIGNATURE: _____

PRINT NAME: _____

DATE: _____



MOTOR VEHICLE (MVR) BACKGROUND CHECK AUTHORIZATION FORM

1. By this document JMF Underground INC. discloses to you that a State Background Check and Driving Records will be obtained for employment purposes as part of the pre-screening background check and at any time during your employment or affiliation.

2. This shall authorize the procurement of a background report by a reporting agency as part of the pre-screening background investigation. If accepted, this authorization shall remain on file and shall serve as an ongoing authorization for the named employer or its associates or other sources to procure background reports at any time during my affiliation or employment period.

3. I also authorize the procurement of an investigative consumer report and understand that it may contain information about my employment and educational background, criminal history, credit, workers comp claims, mode of living, character and personal reputation. I also understand you may make use of the internet including social networking sites. I understand that I have the right to obtain additional disclosure as to the nature and scope of the investigation upon written request within a reasonable period of time and to obtain a copy of the report upon request. This authorization, in original or copy form, shall be valid for this and any future reports or updates that may be requested.

4. In connection with this request, I authorize all corporations, companies, former employers, supervisors, credit educational institutions, law enforcement/criminal justice agencies, city, state, county and federal courts, state motor vehicle bureaus and persons to release information they may have about me to the person or company with which this form has been filed if required, or their agent. I further authorize you to secure an investigative consumer report at any time, and any number of times, before, during and after my employment, if in the company's (or its designees) discretion, it has a legally permissible and legitimate business need for the information requested.

5. As it relates to driving records, I authorize JMF to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquiries and releasing information in connection with my application. I understand that information I provide regarding current or previous employers may be used, and those employers will be contacted for the purpose of investigating my safety performance history as required by 49 CFR 391.23(d) and (e).

I release and hold harmless all parties involved from any and all liability for damages arising from requesting, procuring or furnishing the requested information except with respect to a violation of the Act. I authorize the employer and its agent/credit reporting agency and all associated entities and its clients to receive any criminal history information or credit report pertaining to me in the files of any state or local criminal justice agency.

Applicant's Signature _____ Date _____

Print Legal Name _____

DOB _____ Social Security Number _____