(PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS)

Our Company fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, disability, or any other basis prohibited by federal, state or local law. In accordance with requirements of the Americans With Disabilities Act, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As Equal Opportunity Employers, we intend to comply fully with applicable federal and State employment laws and the information requested on this application will only be used for purposes consistent with those laws. Applications are only accepted for positions currently available and will only be considered for thirty (30) days from today's date or until the position applied for is filled, whichever first occurs.

COMPANY NAME:	Hermann Sand And Gravel, Inc. F	P.O. Box 261 Hermann, Mo 65041	
POSITION APPLIED FOR:	Deckhand, Mate, Engineer	, Captain/Mate Circle One	DATE:
PERSONAL DATA:			
		Salary exp	ectations:
Last Name	First		Middle
Street Address	City	State/Zip Code	Telephone Number
			sed only for child labor law purposes
Are there any days, shifts or h	ours you will not work?	If yes, please explain:	
Are you available for out of to	own work? Will v	vou work overtime, if required	?
	Series 11.01.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		
When will you be able to star	t work?		
Have you taken any illegal dr	ugs in the last 30 days?		
Have you ever been a defend	ant in a civil action for an intentic	onal tort (intentional commissio	n of a wrongful act)? Yes □ No □
Note: Answering "yes" does no	ot automatically exclude you from	further consideration for the po	osition.
If yes, include nature of the inte	entional tort and the disposition o	f the action:	
D-100-100-100-100-100-100-100-100-100-10			

How did you learn of our Cor	mpany?		A CONTRACTOR OF THE PARTY OF TH
If referral, who were you refer	rred by?		######################################
Have you ever applied or wo	rked here before? Yes 🗖 No 🗀	If yes, provide dates:	
Have you ever applied or wo	rked at our Company before? `	Yes□ No□ If yes, provide o	dates:
Are you legally authorized to	work in the United States? Yes	□ No □	

Note: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status)? Yes □

No 🗆

DRIVING RECORD (Ans	wer only	if drivir	ng is a rec	uirement of the j	ob for w	vhich you are	applying)
Do you have a valid drivers license	? Yes □	No 🗖	State_	License	No.:		
Have you had any tickets? Yes □	No 🗖	If yes	s, please ex	xplain:			
Has your license ever been suspen	ided or rev	oked?	Yes 🗖 No	□ If yes, ple	ease expl	ain:	
Note for Massachusetts applicants convictions within the past 5 years.	ONLY: In	the follo	wing quest	ion, the reference to	DUI/DW	/I includes OUI.	You are only required to lis
Do you have any DUI or DWI conv	rictions? Y	es 🗖 N	No 🗖	If yes, please state	when yo	ou were convic	ted and explain:
lf yo you must	ou are an t also con	applica nplete	ant for a c the speci	commercial moto al section at the	or vehic back o	le position, f this applica	tion
RESIDENCES: (Part 391.2 ning with the most recent addr		(Please	e provide	your addresses o	f reside	nce for the p	ast seven years begin-
Street Address		City, S	State and Z	ip Code		From	То
Street Address		City,	State and Z	Zip Code		From	То
Street Address		City, State and Zip Code			From	То	
Street Address		City, S	State and Z	ip Code		From	То
Street Address		City,	State and Z	Zip Code		From	То
EDUCATION: (May or r Describe any educational deg				1-11 A-114 DV			ne job applied for:
Name, City and State of	Gradi	uated?	If no	Type of Degree			Grade Point
Educational Institution	Yes	No	Degree, Credits earned	Received or Expected	Majoi	Minor	Overall GPA
High School							
College or University							
Technical/GED							
Licenses/Certifications/Other							

A1-100-0309

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EMPLOYMENT HISTORY: (Please complete for all full-time or part-time employment beginning with most recent employer.

	Tel #		
Address	Dates Employed	From	То
Name of Supervisor May we contact? Yes D No D	Rate of Pay	Start	Last
State job titles and describe job duties	Reason For Leaving	ation and the second se	
For Driver Applicants only: Vere you subject to the FMCSA Regulations while employed? Vas your job designated as a safety-sensitive function in any DOT-Re 19 CFR Part 40? Yes No	Yes □ No □ egulated mode¹ subject to	the drug and alcoh	nol testing requiremen
Company Name	Tel #		
Address	Dates Employed	From	То
Name of Supervisor May we contact? Yes □ No □	Rate of Pay	Start	Last
State job titles and describe job duties	Reason For Leaving		
Company Name	Tel #		
49 CFR Part 40? Yes No No C	Tel #		
A 1.1	Dates Employed	From	То
Address			
	Rate of Pay	Start	Last
Address Name of Supervisor May we contact? Yes \(\sigma \) No \(\sigma \) State job titles and describe job duties	Rate of Pay Reason For Leaving	Start	Last
Name of Supervisor May we contact? Yes □ No □	Reason For Leaving Yes No		
Name of Supervisor May we contact? Yes \(\simeq \) No \(\simeq \) State job titles and describe job duties For Driver Applicants only: Were you subject to the FMCSA Regulations while employed? Was your job designated as a safety-sensitive function in any DOT-R 19 CFR Part 40? Yes \(\simeq \) No \(\simeq \)	Reason For Leaving Yes No		
Name of Supervisor May we contact? Yes \(\simeq \) No \(\simeq \) State job titles and describe job duties For Driver Applicants only: Were you subject to the FMCSA Regulations while employed? Was your job designated as a safety-sensitive function in any DOT-R 19 CFR Part 40? Yes \(\simeq \) No \(\simeq \) Company Name	Reason For Leaving Yes No leaving		
Name of Supervisor May we contact? Yes \(\simeq \) No \(\simeq \) State job titles and describe job duties For Driver Applicants only: Were you subject to the FMCSA Regulations while employed? Was your job designated as a safety-sensitive function in any DOT-R 49 CFR Part 40? Yes \(\simeq \) No \(\simeq \) Company Name Address	Reason For Leaving Yes No Regulated mode' subject to	the drug and alco	hol testing requiremer
Name of Supervisor May we contact? Yes \(\simeq \) No \(\simeq \) State job titles and describe job duties For Driver Applicants only: Were you subject to the FMCSA Regulations while employed? Was your job designated as a safety-sensitive function in any DOT-R 49 CFR Part 40? Yes \(\simeq \) No \(\simeq \) Company Name	Reason For Leaving Yes No Regulated mode' subject to Tel # Dates Employed	the drug and alco	hol testing requiremen

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NAME	lease list three persons not re	PHONE	RELATIONSHIP
NAME	ADDRESS	FHONE	KELATIONSHII
Please explain any gaps in	your employment history		
Have you ever been discha	arged or forced to resign? Yes [□ No □ If yes, explain	TI: -
Did you receive any discip	line in the last 12 months of acti	ive employment? Yes □ No	If yes, please explain:
, , ,	ance evaluation within the last 1 what was your score?	W 85	ent? Yes □ No □ If yes, what was the
company? Yes □ No □			hat might restrict you from working for this
MILITARY SERVI	CE: (Complete only if you	served in the military)	
Branch of Service:		_ Number of Years/Months	of Service:
Rank at Discharge:	Date of Di	scharge:	Reason for leaving:
Describe any military skills	, training or experience you beli	eve are relevant to the job a	pplied for:
MANAGEMENT (1997)			
LIE DETECTOR 1	TESTS		
			minister a lie detector test as a condition nall be subject to criminal penalties and
tinued employment, an	individual submit to or take a	lie detector or similar test	lition of prospective employment or con- s. An employer who violates this law is and acknowledge this notice:
Applicant's Signature:			

CRIMINAL RECORD INFORMATION

All Applicants: You must answer all four questions below (with the exception of New Hampshire applicants, who must answer questions "a" through "c" in the New Hampshire box, and then question #4 on the following page). In addition, Massachusetts applicants should only answer these questions if the box next to "Massachusetts Applicants" below is checked.

When answering the following questions, you may exclude any records expunged, annulled, sealed, discharged, dismissed, erased under first-offender law or otherwise eradicated by statute or court order. You may also exclude a first conviction for any of the following misdemeanors; drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace.

A criminal conviction will not necessarily be a bar to employment but will be considered in relation to specific job requirements...

California Applicants: When answering questions #1 through #4 below, you need not identify any conviction for a marijuana-related offense if the conviction is more than two years old, or any information pertaining to referral to and participation in any pre-trial or post-trial diversion program.

Connecticut Applicants: When answering questions #1 through #4 below, you need not disclose the existence of any arrest, criminal charge or conviction records which have been erased pursuant to Conn. Gen. Stat. §§46b-146, 54-760, 54-142a. Also note that the aforementioned criminal records subject to erasure are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nulled, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon; and any person whose criminal records have been erased pursuant to the aforementioned sections is deemed to have never been arrested within the meaning of the general statutes with respect to the proceedings so erased and may so swear under oath.

Massachusetts Applicants: Do not respond to these questions unless this box is checked: □

If you are required to respond to these questions because this box is checked, please note that when answering these questions, an applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances, or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances, and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution. When answering question #3, you may exclude a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace. You may also exclude any convictions of misdemeanors which are more than five years old if you have not been convicted of a misdemeanor in the past five years.

New Hampshire Applicants : Answer the following questions (a, b, and c) and then skip to question #4 on the next page (do not answer questions 1 through 3).						
	a.	. Have you ever been convicted of a crime that has not been annulled by a court?				
		Yes 🗖	No 🗆	Date of Conviction:		
	b. Have you been convicted within the last seven years of any of the following crimes that have not been annulled court: misappropriation of funds, embezzlement, or similar for other dishonest conduct; or an offense involving use of a weapon; for burglary, robbery, breaking and entering or theft; or physical assault or other violent crime					
		Yes 🗖	No □	Date of Conviction:		
			ou been convicted of or completed s not been annulled by a court?	d a period of incarceration within the past five years for any misdemeanor		
		Yes 🗖	No □	Date of Conviction:		

A1-100-0309

1.	1. Have you been convicted of a felony within the last seven years?				
	Yes No Date of Conviction:				
2.	Have you been convicted within the last seven years of misappropriation of funds, embezzlement, or similar for other dishonest conduct; or an offense involving the use of a weapon; for burglary, robbery, breaking and entering or theft; or physical assault or other violent crime?				
	Yes No No				
3.	Have you been convicted of or completed a period of incarceration within the past five years for any misdemeanor?				
	Yes □ No □				
	If the answer to the above question is "yes", please state whether you were convicted more than five years ago for any offense?				
	Yes □ No □				
4.	A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe your criminal conviction(s) including penalty (ies) imposed, listing the nature of your offense(s), and your rehabilitation				
	since the conviction(s).				

APPLICANT'S ACKNOWLEDGMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document may be cause for my dismissal at any time without prior notice. I consent to and authorize this Company to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give the Company (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR MY EMPLOYER WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER POLICY, CUSTOM, BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE BASIC EMPLOYMENT POLICIES, PERSONNEL HANDBOOK OR ANY PERSONNEL MANUALS) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE EMPLOYER. I ALSO UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT MAY NOT CHANGE ABSENT AN INDIVIDUAL WRITTEN AGREEMENT SIGNED BY BOTH ME AND THE PRESIDENT OF THE COMPANY.

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination; submit to a background investigation; take a pre-employment drug test. If I am offered employment or start work before any required test is completed, my employment is contingent on a satisfactory result on all required tests. I authorize the release of any background check results of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from the Company at the conclusion of this 30 day period, it is my responsibility to complete a new application if I still wish to be considered for employment.

CALIFORNIA APPLICANTS ONLY: I understand the Company may obtain, without using the services of a third party investigative consumer reporting agency, public records pertaining to my character, general reputation, personal characteristics or mode of living during its evaluation of my application for employment and, if employed, during my employment. By checking the following box, I waive my right to receive copies of public records obtained by the Company.□

Signature:	Date:
Signature	Date

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NOTIFICATION OF RIGHTS FOR APPLICANTS FOR A COMMERCIAL MOTOR VEHICLE DRIVER POSITION

The Information you provide in accordance with FMCSA regulations may be used, and your previous employers may be contacted for the purpose of investigating your safety performance history information (as required by 49 C.F.R. 391.23). You have the following rights regarding the investigative information that will be provided to the Company. (1) The right to review information provided by previous employers; (2) The right to have errors in the information corrected by the previous employer and for that previous employer to re-send the corrected information to the Company; (3) The right to have a rebuttal statement attached to the alleged erroneous information, if the previous employer and you cannot agree on the accuracy of the information. If you wish to review previous employer-provided investigative information, you must submit a written request to the Company, no later than 30 days after being employed or being notified of denial of employment. The Company will provide the requested investigative information to you within five (5) business days of receiving this written request, or five (5) business days of receiving this written request, or five (5) business days of receiving this written request, or five (5) business

CERTIFICATION FOR ALL APPLICANTS - PLEASE READ CAREFULLY

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. (Part 391.21(b) (12))

Signature:	Date:
9	