

# **WILDISH**

## **DRIVER STANDARDS**

P. O. Box 40310  
Eugene, Oregon 97404-0047

3600 Wildish Lane  
Eugene, Oregon 97408-0416

Phone (541) 485-1700

Fax (541) 683-7716

### ATTENTION MOTOR VEHICLE DRIVERS:

Before you complete an application to drive a motor vehicle for Wildish, please understand the following:

Wildish has a zero tolerance for alcohol abuse, illicit drug use, and harassment of any kind.

Wildish requires your driving record to be free of any Class A driving convictions for the past five years. These include:

Driving while intoxicated.

Driving under the influence of drugs.

Negligent homicide arising out of the use of a motor vehicle.

Operating a vehicle during a period of suspension or revocation.

Using a motor vehicle for the commission of a felony.

Aggravated assault with a motor vehicle.

Operating a motor vehicle without owner's authority (grand theft).

Permitting an unlicensed driver to drive.

Reckless driving.

Speed contest (exceeding 20 mph over posted speed limit).

Hit and run (BI or PD) driving.

If you cannot meet these basic standards, please do not apply.

The Federal Motor Carrier Safety Regulations, Title 49 Section 391.21(b)(10) require DOT-regulated employers to inquire about your previous employment. The information you provide may be used, and your previous employers will be contacted, for the purpose of investigating your safety performance history information required by Section 391.23(d) and (e). You have due process rights as specified in Section 391.23(i) regarding information received as a result of these investigations, namely: 1) the right to review information provided by previous employers; 2) the right to have errors corrected by the previous employer; and 3) the right to have a rebuttal statement attached to alleged erroneous information.

**PLEASE PROVIDE A COPY OF YOUR CURRENT CDL LICENSE AND MEDICAL CARD**



3600 Wildish Ln., Eugene, OR 97408 | P.O. Box 40310, Eugene, OR 97404 | Phone (541) 485-1700

## EMPLOYMENT APPLICATION

Wildish is an equal opportunity employer. Wildish does not discriminate on the basis of race, color, religion, gender, gender identity, sexual orientation, national origin, marital status, age, family relationship, mental or physical disability, genetic information, status as a disabled or other eligible veteran, military reserve status, inquiry or discussion about compensation, opposition to safety and health hazards, application for workers' compensation benefits, or any other protected category under applicable state/federal law.

To provide a safe work place and to comply with applicable laws, Wildish has implemented an alcohol and drug policy which includes testing of all prospective and current employees.

Some of our jobs have specific physical requirements. Any offer of employment may be conditioned upon a satisfactory medical evaluation. You are not obligated to disclose information about physical or mental limitations that you believe will not interfere with your capability to do the job. If you want Wildish to consider special arrangements to accommodate a physical or mental impairment, you may identify that impairment and suggest the kind of accommodation that you believe would be appropriate.

Position(s) applied for \_\_\_\_\_

Name \_\_\_\_\_  
(First) (Middle) (Last) (other last name(s))

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security Number \_\_\_\_\_ Email Address \_\_\_\_\_

Previous Employment with Wildish? No \_\_\_ Yes \_\_\_ Date(s) \_\_\_\_\_

Home Address the Past 3 Years:

Address	City	State	Zip	Dates: From – To

### Employment History

Please provide the following information for all employers that you worked for during the past three years. If applying for a truck driver position, list all employers that you drove a commercial motor vehicle for during the past **TEN** years (attach additional sheets, if needed).

Employer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Job Title \_\_\_\_\_ Was CDL Required: Yes \_\_\_ No \_\_\_

Were you subject to the Federal Motor Carrier Safety Regulations (FMCSRs) while employed? Yes \_\_\_ No \_\_\_

If yes, was your job designated a safety-sensitive function subject to the Drug and Alcohol Testing Requirements of 49CFR 40? Yes \_\_\_ No \_\_\_

Reason for leaving \_\_\_\_\_

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Employer \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Contact Person \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
Job Title \_\_\_\_\_ Was CDL Required: Yes \_\_\_ No\_\_\_  
Were you subject to the Federal Motor Carrier Safety Regulations (FMCSRs) while employed? Yes \_\_\_ No\_\_\_  
If yes, was your job designated a safety-sensitive function subject to the Drug and Alcohol Testing Requirements of 49CFR 40? Yes \_\_\_ No \_\_\_  
Reason for leaving \_\_\_\_\_

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Employer \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Contact Person \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
Job Title \_\_\_\_\_ Was CDL Required: Yes \_\_\_ No\_\_\_  
Were you subject to the Federal Motor Carrier Safety Regulations (FMCSRs) while employed? Yes \_\_\_ No\_\_\_  
If yes, was your job designated a safety-sensitive function subject to the Drug and Alcohol Testing Requirements of 49CFR 40? Yes \_\_\_ No \_\_\_  
Reason for leaving \_\_\_\_\_

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Employer \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Contact Person \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_  
Job Title \_\_\_\_\_ Was CDL Required: Yes \_\_\_ No\_\_\_  
Were you subject to the Federal Motor Carrier Safety Regulations (FMCSRs) while employed? Yes \_\_\_ No\_\_\_  
If yes, was your job designated a safety-sensitive function subject to the Drug and Alcohol Testing Requirements of 49CFR 40? Yes \_\_\_ No \_\_\_  
Reason for leaving \_\_\_\_\_

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**Comments/Other Information (any gaps of employment and/ or unemployment must be explained):**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check (✓) **NO** or **YES** to each of the following questions:

Would you work weekend shifts if needed?

No \_\_\_ Yes \_\_\_

Would you work overtime if needed?

No \_\_\_ Yes \_\_\_

Would you work night shifts if needed?

No \_\_\_ Yes \_\_\_

Do you have a First Aid/CPR/AED card?

No \_\_\_ Yes \_\_\_ Expiration Date: \_\_\_\_\_

Do you have dependable transportation?

No \_\_\_ Yes \_\_\_

Do you have certified flagger card?

No \_\_\_ Yes \_\_\_ Expiration Date: \_\_\_\_\_

Do you have a valid driver's license?

No \_\_\_ Yes \_\_\_ Expiration Date: \_\_\_\_\_

State: \_\_\_\_\_ License #: \_\_\_\_\_

Do you have a certified crane operator card?

No \_\_\_ Yes \_\_\_ Expiration Date: \_\_\_\_\_

Do you have a valid CDL?

No \_\_\_ Yes \_\_\_ Class CDL: \_\_\_\_\_

Endorsements: \_\_\_\_\_

Do you have a certified fork lift operator card?

No \_\_\_ Yes \_\_\_ Expiration Date: \_\_\_\_\_

Can you perform the essential job functions with or without accommodations? No \_\_\_ Yes \_\_\_

If accommodations needed, please explain: \_\_\_\_\_

To work in the highway/heavy industry, you must be 18 years of age or older. Are you of age to work in this industry? No \_\_\_ Yes \_\_\_

**SKILLS INVENTORY**

FOR EACH SKILL SHOWN, ENTER YOUR **YEARS** OF EXPERIENCE ON THE LINE TO THE LEFT OF THE SKILL.

**GENERAL:**

- \_\_\_\_\_ Flagger
- \_\_\_\_\_ Skill Saw
- \_\_\_\_\_ Chain Saw
- \_\_\_\_\_ Whackers
- \_\_\_\_\_ Jack Hammer
- \_\_\_\_\_ Air Track & Drill
- \_\_\_\_\_ Small Truck (2 Ton)
- \_\_\_\_\_ Mixing Grout
- \_\_\_\_\_ Tying Rebar

**PIPE LAYER:**

- \_\_\_\_\_ Phone
- \_\_\_\_\_ Waterline
- \_\_\_\_\_ Manhole
- \_\_\_\_\_ Tunnel
- \_\_\_\_\_ Concrete Sanitary
- \_\_\_\_\_ Other Sanitary
- \_\_\_\_\_ Concrete Storm
- \_\_\_\_\_ Other Storm

**TESTER:**

- \_\_\_\_\_ Sanitary
- \_\_\_\_\_ Manhole
- \_\_\_\_\_ Waterline

**CARPENTER:**

- \_\_\_\_\_ Forms
- \_\_\_\_\_ Finish
- \_\_\_\_\_ **CEMENT FINISHER**
- \_\_\_\_\_ **GRADE CHECKER:**
- \_\_\_\_\_ Hand-Eye Level
- \_\_\_\_\_ Blue Tops
- \_\_\_\_\_ Hub & Stake
- \_\_\_\_\_ Slopes
- \_\_\_\_\_ Laser
- \_\_\_\_\_ Engineer Level
- \_\_\_\_\_ Dumpman – Rock
- \_\_\_\_\_ Dumpman – Asphalt
- \_\_\_\_\_ Asphalt Raker

**OPERATOR:**

- \_\_\_\_\_ Broom
- \_\_\_\_\_ Asphalt Paver
- \_\_\_\_\_ Screed
- \_\_\_\_\_ PCC Paver
- \_\_\_\_\_ Trimmer
- \_\_\_\_\_ Chip Spreader
- \_\_\_\_\_ Rotomill
- \_\_\_\_\_ Curb Machine

- \_\_\_\_\_ Rock Roller
- \_\_\_\_\_ C T B Roller
- \_\_\_\_\_ Asphalt Roller
- \_\_\_\_\_ Rubber Tired Hoe
- \_\_\_\_\_ Track Hoe (under 1 cy)
- \_\_\_\_\_ Track Hoe (over 1 cy)
- \_\_\_\_\_ Scraper
- \_\_\_\_\_ Rough Blade
- \_\_\_\_\_ Finish Blade
- \_\_\_\_\_ Dozer (Small)
- \_\_\_\_\_ Dozer (Medium)
- \_\_\_\_\_ Dozer (Large)
- \_\_\_\_\_ Rubber Tired Loader
- \_\_\_\_\_ Track Loader
- \_\_\_\_\_ Skid Steer Loader
- \_\_\_\_\_ Forklift
- \_\_\_\_\_ Manlift
- \_\_\_\_\_ Boom Truck
- \_\_\_\_\_ Crane
- \_\_\_\_\_ **ROCK CRUSHER**
- \_\_\_\_\_ **A/C PLANT**
- \_\_\_\_\_ **PCC PLANT**

**DRIVER:**

- \_\_\_\_\_ Dump
- \_\_\_\_\_ Tractor/Trailer
- \_\_\_\_\_ Lowboy
- \_\_\_\_\_ Water Truck
- \_\_\_\_\_ **MECHANIC:**
- \_\_\_\_\_ Heavy Duty Truck
- \_\_\_\_\_ Construction Equip

**EDUCATION:**

- \_\_\_\_\_ High School
- \_\_\_\_\_ Trade School
- \_\_\_\_\_ College

**OTHER:**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## ACKNOWLEDGMENT

### I understand and agree:

1. That although Wildish makes every effort to accommodate individual preferences, business need may at any time make the following conditions mandatory: overtime, shift work, weekend work, or evening work.
2. That my employment may be denied or terminated if I provide false, misleading, or incomplete information during the hiring process or at any time during my employment.
3. That if I am hired, I must produce applicable documents showing that I am lawfully authorized to work in the United States, in accordance with the Immigration Reform and Control Act of 1986, as amended.
4. That my employers, educational institutions, and other references, listed or not listed in this Employment Application, may be contacted by Wildish. These references are authorized to give Wildish any and all pertinent information they may have. I release all persons or entities involved, including Wildish, from all liability arising from this contact and provision of information.
5. That if I am hired, I am required to submit to alcohol and/or drug and/or medical screenings as a condition of employment by Wildish. I understand that refusal to submit to any screening or to provide complete and truthful information will make me ineligible for employment.
6. That Wildish is authorized to provide my Social Security Number, or part thereof, to third parties when required by law or contract.
7. To conform to all Wildish policies, rules, and procedures.
8. That nothing contained in this Employment Application, in the granting of an interview, or in the offer of employment creates a contract for employment between Wildish and myself. If an employment relationship is established, I understand that, unless specifically limited in an expressed, formally executed contract, I have the right to terminate my employment at any time and for any reason and Wildish has the same right.
9. That information I provide regarding current and/or previous employer(s) may be used, and those employer(s) will be contacted, for the purpose of investigating my safety performance history as required by 49CFR 391.23(d) and (e).
10. That I have the right to review information provided by my current and/or previous employer(s). If I believe there are any errors in the information provided by any such employer, I have the right to have errors in the information corrected by such employer(s), and for those employers to re-send the corrected information to Wildish. If the previous employer(s) and I cannot agree on the accuracy of the information, I have the right to have a rebuttal statement attached to the alleged erroneous information.

**In addition, I authorize** my prior employer(s) to release information from DOT regulated drug & alcohol testing records. I authorize release of alcohol tests, positive drug tests, refusal to test, other violations of DOT agency regulations, documentation of completion of the return-to-duty following a rule violation, and any other information obtained from previous employers of a drug & alcohol rule violation.

**I certify that this Employment Application was completed by me, that all entries on it and information in it are true and complete to the best of my knowledge, and that I have read and understand the above.**

**Applicant's Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

# EMPLOYMENT APPLICATION – DRIVER SUPPLEMENT

AUTHORIZED RELEASE OF EMPLOYMENT DRIVING RECORD WITH DRUG TEST RESULT INFORMATION	
1. Complete all information on form	
2. DMV Account #:	Wildish Sand & Gravel Co.
3. Send completed form to: Fax: 541-683-7716	3600 Wildish Lane Eugene, Oregon 97408
I, _____, of _____ <div style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <span>Print Name</span> <span>Print Address</span> </div> <p style="text-align: center;"><b>Authorize the release of information required by 49 CFR Park 391.23 to Wildish Sand &amp; Gravel Co.</b></p>	
Driver's License Number: _____ State of Issue: _____ Date of Birth: _____	
<b>X</b> _____ Signature of Driver	<b>X</b> _____ Date

The following information will be used where applicable for a request concerning your driving record to comply with DOT and state regulations:

1. I certify that I possess **ONLY ONE** commercial driver's license (listed above). Yes\_\_\_ No\_\_\_
2. Have you been denied a license, permit, or privilege to operate a motor vehicle? Yes\_\_\_ No\_\_\_
3. Has any license, permit, or privilege been suspended or revoked? Yes\_\_\_ No\_\_\_
4. In the past three years, have you tested positive, adulterated a sample, or refused a drug or alcohol test? Yes\_\_\_ No\_\_\_
5. In the past three years, have you had an alcohol test with a result of 0.04 or higher? Yes\_\_\_ No\_\_\_
6. If the answer to any of questions 2 through 5 above is yes, please explain:

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Please list all motor vehicle accidents during the past three years:

**If no vehicle accidents to report, please check here**

Date (Month/Year)	Location & Nature of Accident (Head on, rear-end, upset, etc.)	Number of Injuries	Number of Fatalities

Please list all traffic violations (other than parking violations) for which you have been convicted, forfeited bond, or collateral during the past three years:

**If no traffic violations to report, please check here**

Date (Month/Year)	Violation	Location	Type of Vehicle

*I certify that I completed this Employment Application – Driver Supplement and that all entries and information in it are true and complete to the best of my knowledge.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

## **WILDISH EMPLOYMENT APPLICATION SUPPLEMENT** **INVITATION TO SELF-IDENTIFY AS A PROTECTED VETERAN**

Wildish is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA), which requires Government contractors to take affirmative action to employ and advance in employment: **(1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans\***.

**If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below.** As a Government contractor subject to VEVRAA, we request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

**I IDENTIFY AS ONE OR MORE OF THE CLASSIFICATIONS OF PROTECTED VETERAN LISTED ABOVE**

**I AM NOT A PROTECTED VETERAN**

Signature \_\_\_\_\_

Date \_\_\_\_\_

\*These classifications are defined as follows:

- A “disabled veteran” is one of the following:
  - 1) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; OR
  - 2) a person who was discharged or released from active duty because of a service-connected disability.
- A “recently separated veteran” means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.
- An “active duty wartime or campaign badge veteran” means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An “Armed forces service medal veteran” means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Protected veterans may have additional rights under USERRA—the Uniformed Services Employment and Reemployment Rights Act. In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free, at 1-866-4-USA-DOL.