



**Stewart Industries International
Birmingham, LLC
APPLICATION FOR EMPLOYMENT
APPLICANTS WILL BE TESTED FOR
ILLEGAL DRUGS**

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

Any applications not completely filled out may not be considered (if it does not apply, use "N/A")

PLEASE COMPLETE PAGES 1-4 DATE: _____

Name: _____
Last First Middle Initial

Present Address: _____ How Long? _____
Street City State Zip

Addresses for past three (3) years: _____ How Long? _____
Street City State Zip
Street City State Zip
Street City State Zip

Telephone No. _____ Referred by: _____

Are you 18 or over? Yes No Do you have the legal right to work in the US? _____

Have you worked for this company before? _____ Where? _____

Dates: From _____ to _____ Rate of Pay: _____ Position: _____

Reason for Leaving: _____

Are you now employed? _____ If not, how long since leaving last employment? _____

Employment desired: FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

Position applied for _____ Rate of pay expected: _____

Is there any reason you might be unable to perform the functions of the job for which you have applied (as described in the job description)? _____
 If yes, explain if you wish.

MILITARY STATUS

HAVE YOU EVER SERVED IN THE ARMED FORCES? Yes No Branch: _____

Speciality _____ Date Entered _____ Discharge Date _____

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD OR RESERVES? Yes No

EDUCATION

Circle Highest Grade Complete: 1 2 3 4 5 6 7 8 High School: 1 2 3 4 College: 1 2 3 4

Last school attended: _____ Address: _____

DO YOU HAVE A DRIVER'S LICENSE? Yes No How will you get to work? _____

Driver's License # _____ State of issue _____ Operator Commercial (CDL) Chauffeur

Expiration Date _____

Have you had any accidents during the past three (3) years? No Yes How many? _____

Have you had any moving violations during the past three (3) years? No Yes How many? _____

UPON HIRING, WE MAY REQUEST A DRIVING HISTORY REPORT FROM DEPARTMENT OF MOTOR VEHICLES.

Stewart Industries International, LLC APPLICATION FOR EMPLOYMENT

Please list two references (*NOT relatives, NOT SII employees, and NOT previous employers/supervisors*)

Name _____	Name _____
Relationship _____	Relationship _____
Company _____	Company _____
Address _____	Address _____
_____	_____
Telephone _____	Telephone _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

WORK EXPERIENCE

Starting with present or most recent, list all previous employers for the past **five (5) years**. List complete mailing address, street number, city, state and zip code. Include self-employment, summer and part time jobs. **Please explain breaks in employment. Attach additional sheets if necessary. You may attach a resume, but complete this application as well.**

EMPLOYER			DATE	
NAME			From	To
ADDRESS			Mo Yr	Mo Yr
CITY	STATE	ZIP	Salary/Wage	
Contact Person	Phone Number		Reason for Leaving	
Position Held				
Was your job designated as a Safety Sensitive function in any DOT/FAA Regulated mode subject to the Drug and Alcohol Testing requirements of 49CFR Part 40? <input type="checkbox"/> Yes <input type="checkbox"/> No				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				

EMPLOYER			DATE	
NAME			From	To
ADDRESS			Mo Yr	Mo Yr
CITY	STATE	ZIP	Salary/Wage	
Contact Person	Phone Number		Reason for Leaving	
Position Held				
Was your job designated as a Safety Sensitive function in any DOT/FAA Regulated mode subject to the Drug and Alcohol Testing requirements of 49CFR Part 40? <input type="checkbox"/> Yes <input type="checkbox"/> No				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				

Stewart Industries International, LLC APPLICATION FOR EMPLOYMENT

EMPLOYER			DATE	
NAME			From	To
ADDRESS			Mo Yr	Mo Yr
CITY	STATE	ZIP	Salary/Wage	
Contact Person	Phone Number		Reason for Leaving	
Position Held				
Was your job designated as a Safety Sensitive function in any DOT Regulated mode subject to the Drug and Alcohol Testing requirements of 49CFR Part 40? <input type="checkbox"/> Yes <input type="checkbox"/> No				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				

EMPLOYER			DATE	
NAME			From	To
ADDRESS			Mo Yr	Mo Yr
CITY	STATE	ZIP	Salary/Wage	
Contact Person	Phone Number		Reason for Leaving	
Position Held				
Was your job designated as a Safety Sensitive function in any DOT/FAA Regulated mode subject to the Drug and Alcohol Testing requirements of 49CFR Part 40? <input type="checkbox"/> Yes <input type="checkbox"/> No				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				

EMPLOYER			DATE	
NAME			From	To
ADDRESS			Mo Yr	Mo Yr
CITY	STATE	ZIP	Salary/Wage	
Contact Person	Phone Number		Reason for Leaving	
Position Held				
Was your job designated as a Safety Sensitive function in any DOT/FAA Regulated mode subject to the Drug and Alcohol Testing requirements of 49CFR Part 40? <input type="checkbox"/> Yes <input type="checkbox"/> No				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				

EMPLOYER			DATE	
NAME			From	To
ADDRESS			Mo Yr	Mo Yr
CITY	STATE	ZIP	Salary/Wage	
Contact Person	Phone Number		Reason for Leaving	
Position Held				
Was your job designated as a Safety Sensitive function in any DOT/FAA Regulated mode subject to the Drug and Alcohol Testing requirements of 49CFR Part 40? <input type="checkbox"/> Yes <input type="checkbox"/> No				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				

Stewart Industries International Birmingham, LLC Certifications, Disclaimers and Acknowledgments

- General Disclaimer:** I understand that Stewart Industries International, LLC, hereafter "SII," is under no obligation to hire me, that any employment I am offered will not be for any specified period of time, that my employment is terminable by either party at will with or without notice or cause, and that no representative of SII has authority to enter into any agreement with me contrary to the foregoing. Applicant agrees that all disputes, claims, and controversies between them, whether individual, joint, or class in nature shall be arbitrated pursuant to the rules of the American Arbitration Association, which the decision or award shall be final, conclusive, binding, and enforceable in a court of law. All costs of arbitration shall be shared equally except that each party shall pay his own legal costs. I understand that nothing contained in my employment application, or in granting of an interview, is intended to create an employment contract between SII and myself for either employment or for the providing of any benefit. I understand that none of the benefits or policies in any handbook issued to me by SII are intended by reason of its publication to confer any rights or privileges to any benefits or policies, or entitle me to remain employed by SII, or to change my status as an "at will" employee (permitted by law). I understand that all statements and provisions in the handbook are procedural and/or guideline and that SII has the right to change any policy, benefit, or procedure at any time without notice.
- Notice of Drug and Alcohol Testing Requirements:** SII is concerned with the health and safety of its employees, as well as the safety of its customers and the motoring public. Therefore, the company requires, as one step of the hiring process and according to DOT/FAA regulations, that all otherwise qualified applicants for employment submit to a drug test. I understand that I will be required to provide urine, hair, or other biological samples to be tested for the presence of controlled substances including, but not limited to, marijuana, cocaine, amphetamines, opiates, phencyclidine and MDMA (Ecstasy). If employed, I will also be required to submit to drug and/or alcohol tests as required by SII substance abuse policy and/or federal, state, or local regulations. I understand that SII may contract with a third party to assist in the administration of drug and alcohol testing and agree to this party being provided with all information to which SII is entitled and subject to the same confidentiality requirements as SII. I further understand that a confirmed positive drug or alcohol test, or a refusal to test, will disqualify me from consideration of employment or will result in my termination from employment. SII will report the results of drug and alcohol test results in accordance with regulatory requirements, including release to motor carriers and/or other third parties upon receipt of a properly executed release document. I also understand that a positive result or refusal on a post accident test may result in denial of any Workers' Compensation claims I may make as a result of injuries sustained in the accident.
- Drug and Alcohol History Release Authorization:** Under the authority granted me by 49 CFR Parts 40 and 382, I hereby authorize and require my previous, current and/or future employers specifically listed as well as any other person or company provided by me in writing or by verbal interview by whom I was employed or to whom I applied for employment in the three years preceding the date of the application to release the date, type of test and result of all drug and alcohol tests taken by me, including the date and type of test for any refusal by me to take a drug or alcohol test to the Employment Placement Representative assigned to process my application at SII. If I tested positive on any controlled substance test, had an alcohol test with a concentration of 0.04 or greater, or refused to take any drug or alcohol test, I also authorize the release of all information concerning my referral to a Substance Abuse Professional (SAP) including all records pertaining to my evaluation and treatment (if required by SAP). I authorize this release by whatever means is most expedient and agree to hold harmless any past employer or any person or company I applied with as well as their employees, agents, or representatives from all liability or damage that may arise from the release of the information specifically authorized here.
- Work Record and Consumer Reports Release Authorization:** I hereby authorize, without liability, any person or organization, including but not limited to any educational institution, training facility or any institution whose name I have given as reference, or by whom I have been previously employed, to furnish SII any information they may have concerning my character, habits, ability, financial responsibility, job performance, and reasons for leaving employment. Furthermore, there may be entities that SII does business with which may request investigative reports or consumer reports which apply to my background. In this case, these reports would apply to my assignment to projects related to the customer, permission to be on the customers' premises and to handle its products and other security concerns to the customer. I authorize SII to obtain future criminal, investigative and/or consumer reports. I hereby release all such persons and organizations from any claims for damages of any kind, which may occur to me by reasons of furnishing such information. I hereby authorize any law enforcement agency or court of record to furnish SII information concerning Motor Vehicle Record, or any felony or misdemeanor of which I have been convicted.
- Applicant Rights (pursuant to 49 CFR Part 391.23(l) effective October 29, 2004):** I understand that I have the right to review information provided by my previous employers, to have errors corrected by the previous employers and re-sent to SII once corrected, and to have a rebuttal statement attached to any alleged erroneous information should my previous employer and I not agree on the accuracy of the information. I further understand that the information provided by me will be used in making employment determinations and that my previous employers will be contacted for the purpose of investigating my safety performance history information as required by paragraphs (c) and (e) of 49 CFR Part 391.23. Request to review previous employer information must be in writing and mailed to Human Resources, 400 W College Ave, Guthrie, OK 73044-3103.
- Agreement to Follow Rules:** If employed, I agree to abide by and observe all company rules, guidelines, and regulations as published by the company or in publicly available regulations or publicly displayed postings. I understand that there is no expectation of privacy for any of my personal property on SII premises, including SII trucks. I consent to and agree that SII may search my personal property located on SII property, along with SII desks, lockers, toolkits, etc. for the purpose of investigating possible violations of company rules or violations of any local, state, or federal law.

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. Any falsification could result in denial of employment or termination of employment, if hired.

Applicant Signature

Date

Applicant Printed Name