DRIVER'S APPLICATION FOR EMPLOYMENT

Applicant Name		Date of Application
(print) Company _	Tri-State Commodities	www.Tristatecommodities.com
	PO Box 1441	Fax: (970)352-1633
Address		E-mail: shupe@tsctrux.com
City	Greeley, CO. 80632-1441	
are considere	e with Federal and State equal employme ed for all positions without regard to race, , veteran status, non-job related disability,	color, religion, sex, national origin, age,
11 × X, 22. (2)		
(a)	TO BE READ AND SIGNED E	BY APPLICANT
employer(s) will be contact	ation I provide regarding current and/ cted, for the purpose of investigating understand that I have the right to:	or previous employers may be used, and those my safety performance history as required by 49
 Review information prov 	rided by previous employers;	
Have errors in the inform	nation corrected by previous employers	s and for those previous employers to re-send the
corrected information to	the prospective employer; and	
Have a rebuttal statement	the prospective employer; and	s information, if the previous employer(s) and
Have a rebuttal statement cannot agree on the acc	the prospective employer; and ent attached to the alleged erroneous curacy of the information.	s information, if the previous employer(s) and
Have a rebuttal statement cannot agree on the acc	the prospective employer; and ent attached to the alleged erroneous curacy of the information.	Date
Have a rebuttal statement cannot agree on the acc Signature	ent attached to the alleged erroneous curacy of the information. FOR COMPANY	DateUSE
Have a rebuttal statement cannot agree on the acc Signature	FOR COMPANY PROCESS RECORD	USE RD
Have a rebuttal statemer cannot agree on the acc Signature APPLICANT HIRED DATE EMPLOYED	FOR COMPANY PROCESS RECOR	USE RD ECTED
Have a rebuttal stateme cannot agree on the acc Signature APPLICANT HIRED DATE EMPLOYED DEPARTMENT	FOR COMPANY PROCESS RECOR REJE POIN	USE RD
APPLICANT HIRED DATE EMPLOYED DEPARTMENT (IF REJECTED, SUMMARY REPORT O	FOR COMPANY PROCESS RECOMPANY PROCESS RECOMPANY PROCESS RECOMPANY PROCESS RECOMPANY CLASS FEICER TO THE REASONS SHOULD BE PLACED IN FILE)	USE RD ECTED IT EMPLOYED SSIFICATION
APPLICANT HIRED DATE EMPLOYED DEPARTMENT (IF REJECTED, SUMMARY REPORT O	FOR COMPANY PROCESS RECOMPANY PROCESS RECOMPANY PROCESS RECOMPANY PROCESS RECOMPANY CLASS POIN CLASS CLASS	USE RD ECTED IT EMPLOYED SSIFICATION
APPLICANT HIRED DATE EMPLOYED DEPARTMENT (IF REJECTED, SUMMARY REPORT O	FOR COMPANY PROCESS RECOR REJE POIN PREASONS SHOULD BE PLACED IN FILE)	USE RD ECTED IT EMPLOYED ESIFICATION
APPLICANT HIRED DATE EMPLOYED DEPARTMENT (IF REJECTED, SUMMARY REPORT OF SIGNATURE OF INTERVIEWING OF	FOR COMPANY PROCESS RECOR REJE POIN FREASONS SHOULD BE PLACED IN FILE) TERMINATION OF EMPLO	USE RD ECTED IT EMPLOYED SSIFICATION
APPLICANT HIRED DATE EMPLOYED DEPARTMENT (IF REJECTED, SUMMARY REPORT OF INTERVIEWING OF INT	FOR COMPANY PROCESS RECOR REJE POIN CLASS FFICER TERMINATION OF EMPLO DEPARTMENT F	USE RD ECTED IT EMPLOYED SSIFICATION

This form is made available with the understanding that J. J. Keller & Associates, Inc. is not engaged in rendering legal, accounting, or other professional services. J. J. Keller & Associates, Inc. assumes no responsibility for the use of this form, or any decision made by an employer which may violate local, state, or federal law.

APPLICANT TO COMPLETE

(answer all questions - please print)

Position(s) Appli	ied for								
Name		Social Se			_ Social Security	curity No			
Last		First		Middle					
List your addres	ses of residency for t	he past 3 years.							
Current Address	Street				City				
	Street			Di	-	HI			
_	State	2	Zip Code	Pnone		How Lo	yr./mo.		
Previous Addresses						How Lo	na?		
7144100000	Street		City		State & Zip Code	How Lo	yr./mo.		
						How Lo	ng?		
	Street		City						
	Street	5 - 2 3 3 1 E S	City	<u> </u>	State & Zip Code	How Lo	ong?vr./mo.		
					•		,		
Do you have the	e legal right to work in	the United States?	4-7			. Wallest I see a land			
Date of Birth	/	/	Can you p	rovide prod	of of age?				
	ommercial Drivers)								
Have you worke	ed for this company be	efore?	Where? _		91.00	والمشروف مستقامات	<u> </u>		
							rick feet House		
Dates: From		. To	Positior	a special rel			grant sametala a		
Reason for leav	ring		Dia girani	3	- Tuel 11 12 12 11	er wert aut er	promotes seemsing a		
Who referred yo	ou?	**** * *******************************	V		Rate of pay ex	pected	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	been bonded?				Name of bond	ing company			
(Answer only if a job	peen bonded? requirement)					9,			
Can you perfor	rm, with or without r	easonable accomm	odation, the ess	sential fun	ctions of the job	[as described in	the attached jo		
description]?	YES □ NO	(a)							
		EN	IPLOYMENT H	IISTORY					
All aldress	applicants to drive	o in interetate co	mmerce mus	t provide	e the following	information or	n all employer		
All driver a	eceding 3 years. L	ist complete mail	ing address, s	treet nun	nber, city, state	and zip code.			
							rovide an add		
Applicants	to drive a comme	ercial motor vehic	cle* in intrasta	te or inte	erstate commen	ce siiaii aiso p ehicle.	Novide an add		
tional 7 years	s' information on the employers in rever	nose employers ic	with the most	recent. A	dd another she	et as necessar	y.)		
(NOTE: LIST	employers in rever	se order starting				50.7840	ALCOHOR TO		
		EMPLOYI	=R		e*	Dan grap g-D	ATE		
		LIVII LOTT				FROM MO. YR.	MO. YR.		
NAME						POSITION HELD	•		
ADDRESS			710			REASON FOR LEA	VING		
CITY		STAT	1 1 2 1 2 2 2 2 2 2		- 13				
CONTACT PER	RSON		PHONE N	-					
WERE YOU SU	UBJECT TO THE FMCS	Rs [†] WHILE EMPLOYE	D? YES N	0			DITC AND ALCOHO		
WAS YOUR JO	OB DESIGNATED AS A	SAFETY-SENSITIVE I FR PART 40? ☐ YES	FUNCTION IN AN'	Y DOT-REG	ULATED MODE SU	BJECT TO THE DE	IOG AND ALGONO		

EMPLOYMENT HISTORY (continued)

yarrigg, "Turny the transfer of	EMPLOYER	a responsible		ATE		
NAME	2		FROM MO. YR.	TO MO.	YR.	
ADDRESS			POSITION HELD	9.8	1 - 132	
CITY	STATE Z	ZIP	REASON FOR LEA	VING	- 4	
CONTACT PERSON	PHONE	NUMBER				
WERE YOU SUBJECT TO THE FMO	CSRs [†] WHILE EMPLOYED? ☐ YES ☐	NO				
WAS YOUR JOB DESIGNATED AS TESTING REQUIREMENTS OF 49	A SAFETY-SENSITIVE FUNCTION IN A CFR PART 40? ☐ YES ☐ NO	NY DOT-REGULATED MODE SUB	JECT TO THE DF	UG AND	ALCOHO	
with the second	EMPLOYER			DATE		
NAME	97870 - 2H DURAH L. V		FROM MO. YR.	TO MO.	YR.	
ADDRESS	Berger word	gar amagu	POSITION HELD	, all	•	
CITY	STATE Z	ZIP	REASON FOR LEA	VING		
CONTACT PERSON	PHONE	NUMBER				
WERE YOU SUBJECT TO THE FMO	CSRs [†] WHILE EMPLOYED? ☐ YES ☐	NO		i,	par Je ^{rra} s	
WAS YOUR JOB DESIGNATED AS TESTING REQUIREMENTS OF 49	A SAFETY-SENSITIVE FUNCTION IN A CFR PART 40? ☐ YES ☐ NO	NY DOT-REGULATED MODE SUB	JECT TO THE DF	UG AND	ALCOHO	
2 Syl	EMPLOYER		DATE			
NAME			FROM	ТО		
ADDRESS	4 V V	E	POSITION HELD	MO.	YR.	
CITY	STATE Z	ZIP	REASON FOR LEA	VING	4.0	
CONTACT PERSON	7.11 × 1.11 × 1.11 × 1.11	NUMBER				
WERE YOU SUBJECT TO THE FMC	SRs [†] WHILE EMPLOYED? YES		5 15 15 15 15 15 15 15 15 15 15 15 15 15			
	A SAFETY-SENSITIVE FUNCTION IN AN		JECT TO THE DR	UG AND	ALCOHOL	
	EMPLOYER	. Committee of the Comm		ATE	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
NAME		6.5	FROM	TO	111 111 1	
ADDRESS	- A	1759	MO. YR. POSITION HELD	MO.	YR.	
CITY	STATE Z	IP.	REASON FOR LEAV	ING	* # 5 * 10 * 10 * 10 * 10 * 10 * 10 * 10 *	
CONTACT PERSON		AULIMPED				
WERE YOU SUBJECT TO THE FMC	SRs [†] WHILE EMPLOYED? YES 1				1 3 3 3 3 5	
	SAFETY-SENSITIVE ELINCTION IN AN		ECT TO THE DRU	JG AND A	LCOHOL	
	EMPLOYER	动物的名词复数数数 自己		ATE		
NAME		No. 1997 To Act of the Property and the second	FROM	ATE TO	2/3 20 ²⁷ 4 2	
ADDRESS			MO. YR. POSITION HELD	MO.	YR.	
CITY	STATE	Pilipina Barah menangan Maringan	REASON FOR LEAVE	NG	Vij	
CONTACT PERSON		NUMBER				
WERE YOU SUBJECT TO THE FMCS	Rs [†] WHILE EMPLOYED? ☐ YES ☐ N					
VAS YOUR JOB DESIGNATED AS A TESTING REQUIREMENTS OF 49 C	SAFETY SENSITIVE FUNCTION IN AND	Y DOT-REGULATED MODE SUBJE	ECT TO THE DRU	G AND AI	COHOL	
ncludes vehicles begins a	NAME OF THE PROPERTY OF THE PARTY OF THE PAR	2 1.48				

*Includes vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 16 or more passengers (including the driver), or any size vehicle used to transport hazardous materials in a quantity requiring placarding.

[†]The Federal Motor Carrier Safety Regulations (FMCSRs) apply to anyone operating a motor vehicle on a highway in interstate commerce to transport passengers or property when the vehicle: (1) weighs or has a GVWR of 10,001 pounds or more, (2) is designed or used to transport more than 8 passengers (including the driver), OR (3) is of any size and is used to transport hazardous materials in a quantity requiring placarding.

	DATES NATURE OF ACCII				ES	INJURIES	HAZARDOUS MATERIAL SPILL	
ACT ACCIDEN	T	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1 V	WATER WATER	
AST ACCIDEN		~						
IEXT PREVIOU								
IEXT PREVIOL							<u> </u>	
AFFIC CONVIC		RFEITURES FOR THE PAST				NS) IF NONE		
	LOCATION		DATE	CHARG		8	PENALTY	
			<u>e fluir acta fa, la </u>		7 10		<u> </u>	
- S-			= 1	-				
		(ATTACH SH	EET IF MORE SF	PACE IS NEEDE				
			AND QUALIFIC		-			
river	STATE	LICENSE NO.	CLASS	ENDO	NDORSEMENT(S)		EXPIRATION DATE	
censes or			100				1, 1	
ermits held						A 10 11	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
the past							20 Mg Mg 12 1	
years	2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5						The state of the s	
				- C			Marine Committee	
		license, permit or privilege to		ehicle?			NO	
		vilege ever been suspended o				YES	NO	
IF THE ANS	WER TO EITHER	A OR B IS YES, GIVE DETA	ILS					
		<u> </u>	grae.				F No. 87	
RIVING EXPE	RIENCE CHEC	K YES OR NO	Language and the same and the	-		TES	APPROX. NO. OF MIL	
	CLASS OF EQ	UIPMENT	CIRCLE TYPE C	F EQUIPMENT	FROM (M/Y)		(TOTAL)	
STRAIGHT TRU	ICK	☐YES ☐ NO	(VAN, TANK, FLAT	, DUMP, REFER)				
	SEMI-TRAILER		(VAN, TANK, FLAT	, DUMP, REFER)	2.5			
	OTRAILERS		(VAN, TANK, FLA	r, DUMP, REFER)		31		
		☐ YES ☐ NO More than 8	(VAN, TANK, FLA	r, DUMP, REFER)				
MOTORCOACH	H - SCHOOL BUS	YES NO passengers	_	_			A Company	
MOTORCOACH	H - SCHOOL BUS	YES NO Nore than 15 passengers	-	_				
OTHER	1 0011002300		2.3					
OTHER		LAST FIVE YEARS:					- COMPILIDADA	
ST STATES OF	PERATED IN FOR	R LAST FIVE YEARS:				- 1	No. 2012 (1942) 1943	
LIGHT ODEOLAL	COLUDEES OF	TRAINING THAT WILL HELP	VOLLAS A DRIVE	R·				
HOW SPECIAL	COURSES OR	S DO YOU HOLD AND FROM	WHOM?					
	HIVING AWARDS	EVEL LINE	E AND QUALIF	ICATIONS - O	THER			
WINOTI OALE DI		EXPERIENC	E AND GUALIF	AAV HEI DINIVO	UR WORK F	OR THIS COL	MPANY	
					JOH WOTHER	011 11110 001		
	JCKING, TRANS	PORTATION OR OTHER EXF	ENIENCE ITIAL I					
	JCKING, TRANSI	PORTATION OR OTHER EXF	PENIENCE ITIAL					
HOW ANY TRU		·/		X				
HOW ANY TRU		OTHER THAN SHOWN ELS		X				
SHOW ANY TRU	AND TRAINING	OTHER THAN SHOWN ELS	EWHERE IN THIS	S APPLICATION		¥ -	2838	
HOW ANY TRU	AND TRAINING	OTHER THAN SHOWN ELS	EWHERE IN THIS	APPLICATION	AN THOSE A	LREADY SHO	DWN)	
SHOW ANY TRU	AND TRAINING	OTHER THAN SHOWN ELS	EWHERE IN THIS	APPLICATION	AN THOSE A	LREADY SHO	DWN)	
IST COURSES	S AND TRAINING	OTHER THAN SHOWN ELS	EWHERE IN THIS	APPLICATION ITH (OTHER TH	AN THOSE A	LREADY SHO	DWN)	
SHOW ANY TRU	S AND TRAINING	OTHER THAN SHOWN ELS	EWHERE IN THIS OU CAN WORK W EDUCATI 7 8 H	APPLICATION ITH (OTHER TH ON GH SCHOOL:	AN THOSE A	LREADY SHO	DWN) GE: 1 2 3 4	
SHOW ANY TRU	S AND TRAINING	OTHER THAN SHOWN ELS	EWHERE IN THIS OU CAN WORK W EDUCATI 7 8 H	APPLICATION ITH (OTHER TH ON GH SCHOOL:	AN THOSE A	LREADY SHO	DWN) GE: 1 2 3 4	
SHOW ANY TRU LIST COURSES LIST SPECIAL I	S AND TRAINING EQUIPMENT OR EST GRADE COM.	OTHER THAN SHOWN ELS TECHNICAL MATERIALS YOU MPLETED: 1 2 3 4 5 6	EDUCATION OF AND SIGN	ON GH SCHOOL:	AN THOSE A	LREADY SHO	DWN)	
SHOW ANY TRU	S AND TRAINING EQUIPMENT OR EST GRADE COM.	OTHER THAN SHOWN ELS TECHNICAL MATERIALS YOU MPLETED: 1 2 3 4 5 6	EDUCATION OF AND SIGN	ON GH SCHOOL:	AN THOSE A	LREADY SHO	DWN)	
LIST SPECIAL I	S AND TRAINING EQUIPMENT OR EST GRADE COM. ATTENDED(No.)	OTHER THAN SHOWN ELS TECHNICAL MATERIALS YO MPLETED: 1 2 3 4 5 6 ME) TO BE REA pplication was completed of my knowledge.	EWHERE IN THIS OU CAN WORK W EDUCATI 7 8 H AD AND SIGN eted by me, a	ON GH SCHOOL: ED BY APPL and that all e	AN THOSE A 1 2 3 4 (CITY, STATE) ICANT entries on	COLLEC	OWN) GE: 1 2 3 4 ormation in it are	
CIRCLE HIGHE	S AND TRAINING EQUIPMENT OR EST GRADE COM. ATTENDED(No.)	OTHER THAN SHOWN ELS TECHNICAL MATERIALS YOU MPLETED: 1 2 3 4 5 6	EWHERE IN THIS OU CAN WORK W EDUCATI 7 8 H AD AND SIGN eted by me, a	ON GH SCHOOL: ED BY APPL and that all e	AN THOSE A 1 2 3 4 (CITY, STATE) ICANT entries on	COLLEC	OWN) GE: 1 2 3 4 ormation in it are	