



**Employment Desired:**

Position applied for \_\_\_\_\_ Salary Desired \_\_\_\_\_ Date Available \_\_\_\_\_

Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary \_\_\_\_\_

Have you ever been employed by us before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If yes may we contact present employer? \_\_\_\_\_

**Employment Experience:**

Start with your present or last job. Include any job related military or volunteer activities.

1. Employer _____ Address Title	Dates Employed _____ Telephone Number _____	Work Performed _____ Reason for Leaving _____	Rate _____
2. Employer _____ Address Title	Dates Employed _____ Telephone Number _____	Work Performed _____ Reason for Leaving _____	Rate _____
3. Employer Rate _____ Address Title	Dates Employed _____ Telephone Number _____	Work Performed _____ Reason for Leaving _____	_____
4. Employer Rate _____ Address Title	Dates Employed _____ Telephone Number _____	Work Performed _____ Reason for Leaving _____	_____

**Other Qualifications:** \_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of a felony? \_\_\_\_\_  
*Conviction will not necessarily disqualify an applicant*

If yes, please explain \_\_\_\_\_

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information's given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Request for Check of Driving Record**

I hereby authorized you to release the following information to R.P.C. Contracting, Inc. for purpose of investigation as required by Section 391.23 of the Federal Motor Carrier safety Regulations. You are released from any and all liability which may result from furnishing such information.

\_\_\_\_\_  
(Applicant's Signature and Date)

**In accordance with the provision of Sections 604 and 607 of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter 1, of Public Law 104-208), I hereby certify the following:**

1. The consumer ( applicant) has authorized in writing the procurement of this report:
2. The consumer ( applicant) has been informed in a separate written disclosure that a consumer report may be obtained for employment purposes;
3. The information requested below will be used for a "permissible purpose" ( i.e., information for employment purposes) and will be used for no other purpose;
4. The information being obtained will not be used in violation of any federal or state equal opportunity law or regulation; and
5. Before taking an adverse action based in whole or in part on the report the consumer (applicant) will receive a copy of the requested report and the summary of consumer rights as proved with the report by the consumer reporting agency.

I also hereby certify that this report request and the above applicant's release notice meet the definition of "permissible uses" of state motor vehicle records under the provisions of the Driver's Privacy Protection Act of 1994 ( public Law 103-322, Title XXX, Section 300002(a)).

\_\_\_\_\_  
(Signature of Requester and Date)

To: NC Department of Motor Vehicles  
1100 New Bern Ave.  
Raleigh, N.C. 27697

Dear Sir/Madam:

The following named person has made application with our company for the position of \_\_\_\_\_.  
As in accordance with Section 391.23 Federal Department of Transportation Regulation, please furnish the undersigned with the applicant's driving record for the past three (3) years.

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ License number & State: \_\_\_\_\_

Requested by:

R.P.C. Contracting, Inc.

Person Requesting: \_\_\_\_\_ Signature: \_\_\_\_\_

**POLICY PROHIBITING SUBSTANCE ABUSE**

It is the policy of RPC Contracting, Inc. ("RPC"), to provide employees with a working environment free of problems associated with substance abuse. Accordingly, RPC employees are prohibited from engaging in the following conduct: (1) the illegal use or possession of drugs, whether on or off duty; (2) the use of alcohol on duty; (3) the abuse of alcohol off duty which adversely affects the employee's job performance; and (4) any off duty conduct related to the illegal use or possession of drugs or the abuse of alcohol which reflects adversely on the reputation of RPC in the community. Employees who engage in the prohibited conduct identified above will receive discipline, up to and including termination of employment.

In order to effectuate this Policy Prohibiting Substance Abuse, RPC may, in its sole discretion, require employees to submit to substance abuse testing upon request. RPC will, in its sole discretion, determine whether the substance abuse testing will be performed on saliva, breath, urine, and/or blood samples provided by the employee. Failure to submit to a substance abuse test when requested by a supervisor or alteration or attempted alteration of a sample submitted for substance abuse testing will result in discipline, up to and including termination of employment.

Any employee who is arrested for conduct related to the illegal use or possession or drugs or the abuse of alcohol must immediately notify his or her supervisor of the arrest. Failure to so notify a supervisor will result in immediate discipline, up to and including termination of employment.

This Policy does not affect the employment at-will nature of the employment relationship between the employee and RPC. Employment at-will means that both the employer and the employee may end the employment relationship at any time for any lawful reason or no reason, with or without advance notice.

Please sign this document in the space provided below to reflect the fact that you have read, understand, and agree to abide by this Substance Abuse Policy.

\_\_\_\_\_  
\_\_\_\_\_ (employee signature)  
\_\_\_\_\_ (name—please print)

\_\_\_\_\_  
\_\_\_\_\_ (witness signature)  
\_\_\_\_\_ (name—please print)

\_\_\_\_\_ (date)