



Personal Information

Date _____ Social Security# _____ Phone Number _____

Last _____ First _____ Middle Int. _____

Present Address _____

Employment Desired

Position _____ Are you employed now? _____ Date you can start _____ Wages Desired _____

Education

	School Name & Location	Years Attended	Date Grad.
High School			
Trade School			
College			
Other			

Physical Record

List any Physical Limitation _____

Do you have any problems hearing? _____ Vision? _____ Have you ever been injured? _____

Give Details: _____

In case of emergency notify: Name _____ Number _____

Employment History

Dates Name & address of Employer Phone Position Wages Reason for Leaving

Background History

Please list below any violations you have been convicted upon the court of law (minor violations are not necessary to list Example: traffic tickets)

<u>DATE</u>	<u>VIOLATION</u>	<u>OUTCOME</u>

Initials: _____

Equipment Operators:

Please list the type of equipment you are able to operate:

Equipment

Years of Experience

****MUST HAVE THIS INFO REGARDLESS IF YOU HAVE A CDL****

License # _____ Expires: _____ Class? _____

CDL? _____

Specific Type Truck Experience: (Ex: Tractor Trailer) _____

Length of Experience? _____

Have you ever been denied a license, permit, or privilege to operate a motor vehicle? _____ If yes, Why? _____

Have you ever had a license suspended or revoked? _____ If yes, Why? _____

References: Give the names of three persons not related to you, whom you have known at least one year of all statements contained in this application.

Name Relationship Phone E-mail

I understand that misrepresentation or omission of the above facts is cause for dismissal. Further, I understand that my, employment is not guaranteed for any specific length of time, and regardless of when my wages or salary is to be paid, I can be terminated at any time.

Employee Signature _____ Date _____

Initials: _____

Equal Employment Opportunity Data Application

The Federal Highway Administration (FHWA) requires the following information to be collected for statistical reporting of applicants as a part of the Affirmative Action Program requirements (FHWA-1273). This information is not used in the employment process nor released in a manner that identifies the individual This form will be removed prior to being forwarded to the hiring authority.

Date: _____ Name: _____

Address: _____

Phone: _____ Position Applied For: _____

How did you hear about us: Friend ___ Walk-in ___ Relative ___ Other _____

Gender: Male ___ Female ___

Date of Birth: _____

Race: ___ Black/Non-Hispanic ___ White/Non-Hispanic ___ Hispanic ___ American Indian or Alaskan Native Asian or Pacific Islander

Military Status: ___ Veteran ___ Non-Veteran ___ Enlisted

Acknowledgement Form

I hereby acknowledge receipt of Lindler's Construction of South Carolina, LLC. Drug-Free Workplace Policy regarding drugs and alcohol. I have read and understand the policy. I understand that refusal to submit any drug or alcohol test required by this policy or a positive test result is grounds for disciplinary action up to and including termination. Furthermore I authorize the release of the test results to my employer, Medical Review Officer, applicable state unemployment agencies, and/or, on post-accidents tests, the company's worker's compensation carrier and understand that refusal to release these results is grounds for disciplinary action up to and including termination. I understand that if I test positive for drugs or alcohol or refuse to submit to any drug and/or alcohol test required by this policy, I may be ineligible for workers' compensation and/or unemployment benefits.

I recognize that the Company's policy on drugs and alcohol does not constitute an expressed or implied contract of employment.

Initial _____

Safety Manual Acknowledgement

I acknowledge that I have received a copy of the Lindler's Construction of South Carolina, LLC. Safety Manual. I have read and understand the procedures described within. I accept the program as a working document which I will support and integrate into my daily work for Lindler's Construction of South Carolina, LLC.

Employee Signature _____ Date _____

Initials: _____

Safety Policy Amendment #1

As an employee of Lindler's Construction of South Carolina, LLC, you are required to wear a hard hat, safety vest and steel-toed shoes when you are on any jobsite. When you step out of a company truck or piece of equipment you must have these on. If you fail to do so, you will receive ONE warning after that you will be written up and then terminated.

I have read and understood the Lindler's Construction of South Carolina, LLC. Safety Policy Amendment. Initial

Profanity Acknowledgement

It is the policy of Lindler's Construction of South Carolina, LLC that all employees refrain from using foul, profane or otherwise offensive language while communicating on the company radio system. Violation of this policy could result in a formal disciplinary action.

I have read and understand the Lindler's Construction of South Carolina, LLC profanity policy. Initial

Lindler's Construction of South Carolina, LLC.

Employee agrees to reimburse Lindler's Construction of South Carolina, LLC. for any damages to anyone's personal property, company equipment, or company trucks caused by myself due to negligence on my part. I also understand that all monies except what equals to Federal minimum wage will be withheld from each paycheck until dept is paid in full (i.e. Work 45 hours and hourly rate is \$9.00/overtime rate \$13.50, Federal minimum wage is \$7.25/10.97,\$1.75 x 40= \$70.00 and \$2.63 x 5 =\$13.15 totaling \$83.15. That would be the total applied to your dept. You would get paid \$7.25 x 40 = \$290.00,\$10.87 x 5= \$5435/total pay would be \$344.35 before taxes)

Loans or charges to company accounts will be handled in the same way. If employment should end, the final paycheck/ paychecks will be applied to the balance due.

Cell phones are also given to employees from time to time and if it becomes lost, stolen or damaged I am responsible for the replacement or repair. Initial

Applicant Information Release

I hereby authorize any person, educational institution, or company I have listed as a reference on my employment application to disclose in good faith any information they may have regarding my qualifications and fitness for employment. I will hold Lindler's Construction of South Carolina, LLC. and its agents, any former employers, educational institutions, and any other persons giving references free of liability for the exchange of this information and any other reasonable and necessary information incident to the employment process.

Initial

Salary Privacy Policy I Acknowledgment

It is a direct violation of company policy and grounds for IMMEDIATE termination for an employee of Lindler's Construction of South Carolina, LLC. to discuss their salary or the salary of another employee.

Any employee guilty of violating this policy will be released from Lindler's Construction of South Carolina, LLC. for without notice, verbal warning or written disciplinary action.

I have read and understand the Lindler's Construction of South Carolina, LLC. salary privacy policy. Initial

Initials: _____

EXAMPLES OF PAYROLL DEDUCTIONS

I acknowledge that I have been given a copy of the Lindler's Construction of South Carolina, LLC. for Examples of Payroll Deductions. I have read and understand the procedures given within. Initial

Examples of Payroll Deductions

Certain deductions will be made from your paycheck by state and federal law. These include state and federal withholding, social security, Medicare and others:

1. For any employee receiving advances in wages, we will deduct an agreed amount from their wages. The agreed amount must be in writing. An overpayment is considered an advance, and can be deducted.
2. Any employee separated from this company for any reason owing this company any indebtedness or having in your possession any company property, we will use your final paycheck/paychecks to cover this indebtedness. If company property is not returned within twenty-four (24) hours, we will use your final paycheck/paychecks to cover this.
3. Any employee leaving this company for any reason will not receive holiday or vacation benefits.
4. For any employee discharged for any reason, his/her final paychecks will be reduced to minimum wages.
5. Any employee who quits without offering and working a two (2) week notice (or what is required by management) his/her final paychecks will be reduced to minimum wages.
6. Employees who operate company vehicles and have a chargeable accident, we may deduct the deductible portion of insurance from your wages. This will not exceed actual cost if less than the deductible.
7. Any employee who incurs a personal debt against this company will be responsible for that debt; it may be deducted from your wages.
8. All employees who handle money will be held responsible for all shortages. It may be deducted from your wages.
9. Employees using cell phones who lose that cell phone will have to pay replacement cost. It may be deducted from your wages.
10. Any employee accepting credit cards or checks who fail to follow company policy will be held responsible for this debt if not paid. It may be deducted from your wages.

Terms of Employment Notice

In compliance with s41-10-30 of the S.C. Code of Laws, as amended, you are hereby notified of the terms of employment:

Full-Time Part-Time

1. Normal Hours of work: 20-50 hours More or Less depending on work circumstances. (i.e., number or range of hours) per week
2. Payday is: Held one week and then paid weekly Work week is: Friday to Thursday
3. Place of payment: Lindler's Construction of South Carolina, LLC. Office Day of payment is: Friday by Noon
4. Deductions to be made from wages such as, but not limited to Insurance deductions, documented debts/offsets, etc, (excluding income taxes and RCA): & Equipment damage, Advances, and any personal expenses.

Any changes in these terms shall be made in writing and at least seven (7) days before they become effective.

Additional Terms

Initials: _____

The following terms may be provided at the discretion of the employer in accordance with individual company policies.

1. Holidays: There are **(5)** paid holidays. New Year’s Day, Independence Day, Thanksgiving Day, Christmas Eve, Christmas Day.
2. Sick leave policy is: There is no paid sick leave.
3. Other: Any employee separated for any reason-any wages do after separation will be mailed to address of record to arrive by scheduled payday.
4. If an employee fails to show up to work for 72 hours, Lindler’s considers that job abandonment and will take that as an employee has quit their job.
5. If an employee is out of work for routine doctors or dentist appointments, employee shall notify company atleast two weeks in advance of the appointment.
6. If an employee is out of work due to an illness or medical problems for more than 24 hours, employee must submit a doctors excuse to the office. Any missed days requiring a medical note that are not received will be marked as unexcused.
7. Employees are allowed 10 unexcused absences in a 12 month work period. If employee exceeds unexcused absences, employee may be terminated from employment.

Drug and Alcohol Policy

I understand that refusal to submit any drug or alcohol test required or a positive test result is grounds for disciplinary action up to and including termination. Furthermore I authorize the release of the test results to my employer, Medical Review Officer, applicable state unemployment agencies, and/or, on post-accidents tests, the company's worker's compensation carrier and understand that refusal to release these results is grounds for disciplinary action up to and including termination. I understand that if I test positive for drugs or alcohol or refuse to submit to any drug and/or alcohol test required by this policy, I may be ineligible for workers' compensation and/or unemployment benefits.

As part of Lindler's Construction of South Carolina, LLC., you will be asked to submit random drug screenings to ensure the safety of yourself, the employees, as well as the public. These screenings are done a few times a year at random draw. DOT requires testing for the following: Amphetamines, Marijuana, Cocaine, PCP and Opiates. You will be asked for a screening 1. When reasonable suspicion exists 2. Following an accident 3. Randomly 4. Pre-employment 5. Prior to promotion. Alcohol Testing will be done as well periodically and can result in termination or suspension.

Employee Signature _____ Date _____

EEO Policy

No one is allowed to verbally or physically abuse or intimidate anyone else while on the job site. Anyone doing so faces immediate removal from the site and is subject to disciplinary action up to and including termination. It is Lindler's Construction of South Carolina, LLC’s policy to treat everyone professionally and to provide a safe workplace for all of our employees. As part of Lindler's, Construction of South Carolina, LLC. we do not discriminate against race, religion, sex, or any other origins. We are an equal opportunity employer and hold all of our staff to these same standards.

“It is the policy of this Company to assure that applicants are employed, and that employees are treated during employment, without regard to their race, religion, sex, color, national origin, age or disability. Such action shall include: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship, pre-apprenticeship, and/or on-the-job training.”- Subject FHWA 1273.

Employees are to contact our EEO officer, Heather Lindler with any and all complaints. 803.276.6557.
If complaints reported to the above officer are unanswered, please use the resource listed below.

Initials: _____

SCDOT External Equal Opportunity Program Coordinator
Office of Business Development & Special Programs
Post Office Box 191
Columbia, SC 29201
Phone: 803-737-1372

EEO Policy Acknowledgement

I have read and understand the EEO/AA Policy for Lindler's Construction of South Carolina, LLC. Initial _____

RELEASE

I give Lindler's Construction of SC, LLC permission to perform a SLED background check before employment if needed.

Employee Signature _____ Date _____

PAYCHECK PICKUP/ REPORT DROP OFF

Time sheets and equipment/ truck reports are to be placed inside the box on the outside of the office door on Thursdays to receive your paycheck on Thursdays. Paychecks will be placed in separate box on the outside of the office door for pick up on Thursdays after work. Paychecks will no longer be advanced earlier in the week. Every Thursday paychecks will be made available.

CDL DRIVER DESCRIPTION

All drivers of this company are required to hold a valid CDL, Medical Card, Clean Motor Vehicle Record, a pass a drug screen. At random, thru the national registry, drivers will be pulled from random for drug and/or alcohol screenings. Our company requires drivers to commit to a 6 day work week schedule (weather permitting) Mondays-Saturdays. We will notify the employees by Thursday afternoons if they will have that Saturday off work. Otherwise, employees are to assume they are to work a full 6 day work week. Hours vary depending on seasons/weather. Typical hours for drivers range from 45-55 hours per week. After 90 days of employment, drivers will be offered vacation time. After 90 days employees are offered health benefits.

COMPANY VEHICLE POLICY

All employees permitted and allowed to drive company vehicles will be requested to submit a MVR periodically. All employees must keep a safe driving history on and OFF work hours. This applies to your personal vehicles as well as your driving record will reflect your safe driving history which will in return affect our insurance. Any and all penalties shown on the employees MVR will determine their eligibility to drive our vehicles. Company vehicles are NOT to be driven under any circumstances after work hours or for any personal use. If an employee is permitted to drive a company vehicle home overnight, vehicle must be parked in a safe place and turned off. Employees are never permitted to make repairs or maintenance of vehicle. If an issue is found, employee is to notify the mechanics for repairs. I hereby give permission for Lindler's to run a Motor Vehicle Report whenever they feel needed before and during my employment. Employee

Signature _____ Date _____

VACATION POLICY

Vacation is offered after 180 of employment. Vacation days will begin on January 1st and expire on December 31st of each year. Any unused days will NOT carry over. Vacation days will need to be requested (2) weeks prior thru the front office in writing. Vacation hours should be used for Dentist, Doctor, Family needs, etc. Both hourly and salary employees shall submit request for vacation days. Sick days will not be paid as sick days, as Lindler's does not offer sick pay. You must submit a vacation request before payroll for pay. Once the employees 180 days of employment are up, 40 hours vacation will automatically be added to the employees account and the pay stub will reflect the balance of hours remaining. Vacation rules follow:

Initials: _____

1. Employee may not cash out vacation hours at the beginning of the year. The employee is given the vacation after their 180 days of work with Lindler's in trade for a 12-month work year.
2. If a vacation day is needed in the beginning of the year, fill out a vacation request form and that will be approved and processed by the front office.
3. If employee gives a 2 week notice of quitting, unused vacation will be forfeited. Same goes for an employee that does not give notice or whom is fired.
4. If employee owes on an employer loan balance, vacation will not be paid until the loan balance due to employer has been paid in full.

I have read and understand all of the above terms of employment with Lindler's Construction of South Carolina, LLC.

Employee Signature: _____ Date: _____

Company Signature: _____ Date: _____

Initials: _____