



## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date Available to Begin Work: \_\_\_\_\_ Social Security: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever worked for this company? YES ☐ NO ☐ If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES ☐ NO ☐

If yes, explain: \_\_\_\_\_

## Driver's License Information

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

CDL Class: \_\_\_\_\_ Hazmat: \_\_\_\_\_ Tanker: \_\_\_\_\_

Have you ever been denied a license, permit, or privilege to operate a motor vehicle? \_\_\_\_\_

Has any license, permit, or privilege ever been suspended or revoked? \_\_\_\_\_

Have you ever been convicted of any criminal act involving the use of a CMV or while operating a CMV? \_\_\_\_\_

If yes to any of the above, please explain: \_\_\_\_\_

## Driving History – Tickets and Accidents

Date	Offense	Location	Type of Vehicle Operated
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



References

Please list three professional references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Education History

Highest Level of Education Completed: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

School Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_





Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

#### Disclaimer and Signature

*I am submitting the attached form to Lightning Trucking Services, LLC., for the purpose of obtaining employment. I acknowledge that completion of this application does not indicate that any position is available, nor does it obligate the company to further process my application.*

*My signature below attests to the fact that the information I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact on my application, resume, any other submitted materials, or verbally portrayed, can be justification for refusal of employment, or if employed, termination from the company's employ.*

*I understand that this application is not an employment contract for any specific length of time between Lightning Trucking Services and the applicant, and that in the event I am hired, my employment will be "at will" and either the company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy, or the like, distributed by the company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the company's behalf. The company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.*

*References: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquiries connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services, or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for the purposes of evaluating my credentials and qualifications.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_





## Motor Vehicle Background Investigative Release

In connection with your application for employment with Lightning Energy Services, LLC. / Lightning Trucking Services, LLC., (referred to herein as "Lightning") it may obtain one or more reports regarding your credit, driving, and/or criminal background history from a consumer reporting agency and/or other sources. If the Prospective Employer user any information it obtains from a background report in determination of hire, or make any other adverse employment decision between you and Lightning, you will be provided a copy of the report upon which decision was rendered and a written summary of your rights under the Fair Credit Reporting Act before any further action is taken, thereby allowing you due time to contact the investigate third party agency regarding any inaccuracies. If any adverse action including termination of employment is taken by Lightning, the employer cannot obtain any further background report from the consumer reporting agencies or other sources regarding you without additional written consent. If you agree that Lightning may obtain such background reports, please read the following and sign:

I authorize Lightning Energy Services, LLC. / Lightning Trucking Services, LLC., to contact any organization or individual that I have included on my employment application or resume, or as otherwise discussed during interviews, and obtain from them any relevant information about my job qualification, including my experience, skills and abilities. I understand that I am consenting to the release of safety performance information including accident history from the previous five (5) years and motor vehicle violations from the previous three (3) year, as well as any reference-related information about me held or known by my former employers, supervisors and co-workers. In addition, I consent to the release of any information about my education, experience, abilities or work-related characteristics or traits held of known by other organizations or individuals, including school and educational institutions, professional or business associates, and friends/acquaintances that Lightning may contact in the course of conducting a reference check or background investigation of my suitability for employment.

I understand and acknowledge that the release of information can involve my qualifications, performance, credentials, or other characteristics or factors affecting my suitability for employment with Lightning. Specifically, I am authorizing the release of any information about my performance, capability, attitude, specific events, or other work-related characteristics that currently are in the possession of the requested organization.

In exchange for the prospective employer's consideration of my employment application, I agree not to file or pursue any complaints, claims or legal actions of any kind against any organization or individual that provides work related information about me to prospective employer or its agents in accordance with the terms and intent of the release. I also agree not to file or pursue any complaints, claims, or legal actions against Lightning or any of its employees, representatives, or agents arising out of their efforts to obtain work related information about me.

I have read the above notice regarding background reports provided to me by Lightning and I understand that if I provide consent by signing this form, Lightning and/or any entity it retains to obtain such background reports and may obtain reports of my credit, driving, and/or criminal background history in addition to information regarding my background, references, education, specific events, and past employment. I hereby authorize Lightning and its employees, agents and its affiliates to obtain the information authorized above.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Background Investigation Release

I authorize Lightning Energy Services, LLC / Lightning Trucking Services LLC to make such investigations and inquiries of my personal, employment, financial, or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, health care providers, and other persons from all liability in responding to inquiries and releasing information in connection with this application.

In the event of employment, I understand that false or misleading information given in my application or interviews may result in termination. I understand, also, that I am required to abide by all rules and regulations of Lightning Energy Services, LLC / Lightning Trucking Services, LLC.

I understand information I provide regarding current and/or previous employers may be used, and those employers will be contacted, for the purpose of investigating my safety performance history as required by 49 CFR 391.23. I understand that I have the right to:

- Review information provided by the previous employers
- Have errors in the information corrected by previous employers at which time the previous employer must re-send a corrected version to the prospective employer.
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer and I cannot agree on the accuracy of the information.

This certifies 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.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## DOT Past Drug/Alcohol and Accident History Authorization to Release

### TO BE COMPLETED BY APPLICANT

Applicant/Employee: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

New Employer Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

New Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Designated Employer Representative: \_\_\_\_\_ E-mail: \_\_\_\_\_

I understand that as a condition of hire with the above named "New Employer", that I must consent to the release of all DOT mandated drug and alcohol information from all of the employers for which I worked in a DOT safety-sensitive position, or for which I took a DOT pre-employment drug test, during the previous two (2) years as required by DOT Part 40.25, (or three (3) years as required by Part 391.23 for any driver of a commercial motor vehicle).

***I hereby authorize the following previous employer / company for which I worked in a DOT safety-sensitive position to furnish the following DOT information to TEAM Background LLC:***

- 1. DOT alcohol and controlled substance information in accordance with DOT Part 40.25 limited to the following DOT regulated testing items, including pre-employment testing results (i) alcohol tests with a result of 0.04 or higher; (ii) verified positive drug tests; (iii) refusals to be tested; (iv) other violations of DOT agency drug and alcohol testing regulations; (v) documentation, in any, of completion of the return-to-duty process following a rule violation.*
- 2. Safety performance history information in accordance with 49 CFR Part 391.23, which includes: employment dates, work history (which may include position held, reason for leaving, any termination information, whether subject to the Federal Motor Carrier Safety Administration regulations, equipment experience, area driven, and other information as applicable) and accident information (including accident date, nature of accident, whether it was preventable, whether there were injuries, fatalities, or hazardous materials involved, and copies of any accident report).*

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

1. Previous Employer Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Previous Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Designated Employer Representative(if known) \_\_\_\_\_

### **FMCSA APPLICANTS ONLY**

Pursuant to Section 391.23(i) of the Federal Motor Carrier Safety Regulations, you have the following rights with regard to the information released:

1. You have the right to make a written request at any time to review the information provided by previous employers, contractors (if owner-operator), or trucking schools, as applicable.
2. You have the right to have errors in the information corrected by the previous employer, contractor (if owner-operator), or trucking school, as applicable and for that employer, contractor (if owner-operator), or trucking school to re-send the corrected information.
3. You have the right to have a rebuttal statement attached to the alleged erroneous information if the previous employer, contractor (if owner-operator), or trucking school and you cannot agree on the accuracy of the information.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



NOTE: Please complete and sign all forms including the Disclosure, Authorization, "Information Regarding Your Rights", FCRA Summary of Rights, and Additional notices if needed for the reports ordered. You are entitled to a copy of each document.

### **AUTHORIZATION FOR BACKGROUND CHECKS**

I hereby authorize \_\_\_\_\_ and its consumer reporting agency TEAM Background, LLC., to obtain a consumer report(s) and investigative consumer report(s). If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for \_\_\_\_\_ to procure such reports at any time during, as permitted by law, my employment, contract, or volunteer period. I authorize without reservation, any person, business or agency contacted by the consumer reporting agency to furnish the above-mentioned information.

I also authorize Company and Agency to use email communication with me to provide me with notices and information regarding any report or use of such report. If I do not have an email address or do not wish to share it, then communication will be by U.S. Mail, which will result in slower communication.

I understand that I have rights under the Fair Credit Reporting Act, and I acknowledge receipt of the Summary of Rights.

### **STATE LAW NOTICES**

Pursuant to state requirements, the following state notices and disclosures are available to state residents.

I understand that if the Company is located in or if I live in California, Minnesota or Oklahoma, that I have the right to request a copy of any report Company receives on me at the time the report is provided to Company.

☐ By checking this box, I request a copy of all such reports be sent to me.

**MASSACHUSETTS:** If you submit a request to us in writing, you have the right to know whether the Company ordered an investigative consumer report from TEAM Background, LLC, which may include any or all of the following: criminal history review, driving record review, credit report review, and employment/education verifications. You may inspect and order a free copy of the report by contacting TEAM Background, LLC.

**MINNESOTA:** If you submit a request to us in writing, you have the right to get from the Company a complete and accurate disclosure of the nature and scope of the consumer report or investigative consumer report ordered, if any, from TEAM Background, LLC, which may include any or all of the following: criminal history review, driving record review, credit report review, and employment/education verifications.

**NEW JERSEY:** If you submit a request to us in writing, you have the right to know whether the Company ordered an investigative consumer report from TEAM Background LLC which may include any or all of the following: criminal history review, driving record review, credit report review, and employment/education verifications. You may inspect and order a free copy of the report by contacting TEAM Background LLC.

**NEW YORK:** If you submit a request to us in writing, you have the right to know whether the Company ordered a consumer report or an investigative consumer report from TEAM Background LLC which may include any or all of the following: criminal history review, driving record review, credit report review, and employment/education verifications.. You may inspect and order a free copy of the reports by contacting TEAM Background LLC. By signing below, you certify you have received a copy of Article 23A of the New York Correction Law is being provided with this form.

**WASHINGTON STATE:** You also have the right to ask TEAM Background LLC Services for a written summary of your rights under the Washington Fair Credit Reporting Act.

**Please print your legal name:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Signature: \_\_\_\_\_ Date (Month/Day/Year): \_\_\_\_\_