

This Employer Participates in E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this employer is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants or to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo screening tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS) photograph.

NOTICE:
Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.

If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 1-800-255-7688 (TDD: 1-800-237-2515).

Employment Verification.  Done.

For more information on E-Verify, please contact DHS at:
1-888-464-4218





kmG Hauling INC.

A Waste Removal, Bulk Service, Recycling & Roll Off Company
Servicing DC, MD & VA

All applicants must meet the DOT Qualifications to become a driver

§ 391.11: General qualifications of drivers.

A person shall not drive a commercial motor vehicle unless he/she is qualified to drive a commercial motor vehicle.

- (1) Is at least 23 years old;
- (2) Can read and speak the English language sufficiently to converse with the general public, to understand highway traffic signs and signals in the English language, to respond to official inquiries, and to make entries on reports and records;
- (3) Can, by reason of experience, training, or both, safely operate the type of commercial motor vehicle he/she drives;
- (4) Is physically qualified to drive a commercial motor vehicle in accordance with subpart E—Physical Qualifications and Examinations of this part;
- (5) Has a currently valid commercial motor vehicle operator's license issued only by one State or jurisdiction;
- (6) Has prepared and furnished the motor carrier that employs him/her with the list of violations or the certificate as required by § 391.27;
- (7) Is not disqualified to drive a commercial motor vehicle under the rules in §391.15; and
- (8) Has successfully completed a driver's road test and has been issued a certificate of driver's road test in accordance with § 391.31, or has presented an operator's license or a certificate of road test which the motor carrier that employs him/her has accepted as equivalent to a road test in accordance with § 391.33.

Date: _____

Position(s) Applied For: _____

Referral Source:

- Advertisement Walk- In
- Friend Present or Former Employee- If yes, who? _____
- Relative Other

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (_____) _____ - _____ Cell Phone: (_____) _____ - _____

Email: _____

Have you filed an application with kmG Hauling, Inc. before? Yes No

Have you ever been employed with kmG Hauling, Inc. before? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

What date are you available to start? _____

Are you able to provide proof that you are legally able to work in the United States? Yes No

Are you a veteran of the U.S. Military? Yes No

If yes, what branch? _____

Are you currently under a non-compete agreement with any other waste management, waste hauling, recycling or roll-off company. Yes No

Education

	ELEMANTARY	HIGH SCHOOL	COLLEGE / UNIVERSITY	GRADUATE / PROFESSION
SCHOOL NAME				
YEARS COMPLETED (PLEASE CIRCLE)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
DIPLOMA/DEGREE				
DESCRIBE COURSE OF STUDY				

Do you have any honors, awards, and/or achievements you would like to share?

List professional, trade, business, or civic activities you have done and at what locations or company name?

Please summarize special skills and/or qualifications for this position acquired from employment or other work- related experience:

Computer Skills: (check block)

		Basic	Proficient	Expert
Microsoft	Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft	Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft	Power	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft	Outlook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	QuickBooks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Gmail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Employment History

Please show your work history for the past ten years starting with the most recent.

Company: _____ Job title: _____

Company Address: _____

City: _____ State: _____ Zip code: _____

Start date: _____ End date: _____ Company Phone#: _____

Supervisor Name: _____ Can we contact this employer: [] Yes [] No

Reason for leaving: _____

.....

Company: _____ Job title: _____

Company Address: _____

City: _____ State: _____ Zip code: _____

Start date: _____ End date: _____ Company Phone#: _____

Supervisor Name: _____ Can we contact this employer: [] Yes [] No

Reason for leaving: _____

.....

Company: _____ Job title: _____

Company Address: _____

City: _____ State: _____ Zip code: _____

Start date: _____ End date: _____ Company Phone#: _____

Supervisor Name: _____ Can we contact this employer: [] Yes [] No

Reason for leaving: _____

.....

Company: _____ Job title: _____

Company Address: _____

City: _____ State: _____ Zip code: _____

Start date: _____ End date: _____ Company Phone#: _____

Supervisor Name: _____ Can we contact this employer: [] Yes [] No

Reason for leaving: _____

*If you need additional space, please use the back of this sheet.

Professional References

Please give name, and telephone numbers of three (3) references who are **not related** to you and are not previous employees of kmG Hauling, Inc.

1. Name: _____ Phone #: (_____)_____-_____

2. Name: _____ Phone #: (_____)_____-_____

3. Name: _____ Phone #: (_____)_____-_____

Please state the salary or hourly wage per week you are looking for, and if this is negotiable:

Indicate languages you speak, read, and/or write.

Language: _____ [] Speak [] Read [] Write

Language: _____ [] Speak [] Read [] Write

Language: _____ [] Speak [] Read [] Write

Please provide personal vehicle information, only if hired:

Licenses plate number: _____

Vehicle make/ model: _____

Please state any additional information you feel may be helpful for this job opportunity:

Military Personnel Only

Government contractors are subject to 38 USC 2012 of the Vietnam Era Veterans Readjustment Act of 1974 which requires that they take affirmative action employ and advance in employment qualified disabled veterans of Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which required government contractors to take affirmative action to employ and advance in employment qualified handicapped individuals. If you are a disabled veteran, or have a physical or mental handicap, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you perform the job to the best of your ability in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect your consideration of employment.

If you wish to be identified, please sign below,

Handicapped

Disabled Veteran

Vietnam Era Veteran

Signature of applicant

Date

This page is for CDL Driver's Only

General Consent for Full and/or Limited Queries of the Federal Motor Carrier Safety Administration (FMCSA) Drug and Alcohol Clearinghouse

I, _____, hereby provide consent to kmG Hauling, Inc. to conduct a Full and/or Limited query of the FMCSA Commercial Driver's License Drug and Alcohol Clearinghouse (Clearinghouse) to determine whether drug or alcohol violation information about me exists in the Clearinghouse.

I, _____, also provide consent to kmG Hauling, Inc. to conduct a single limited query and/or multiple limited queries. These queries will be conducted over a fixed period of time and/or for the duration of my employment with kmG Hauling, Inc.

I, _____, understand that if the Full and/or Limited query conducted by kmG Hauling, Inc. indicates that drug or alcohol violation information about me exists in the Clearinghouse, FMCSA will not disclose that information to any other company without first obtaining additional specific consent from me.

I, _____, further understand that if I refuse to provide consent for kmG Hauling, Inc. to conduct a Full and/or Limited query of the Clearinghouse, kmG Hauling, Inc. must prohibit me from performing safety-sensitive functions, including driving a commercial motor vehicle, as required by FMCSA's drug and alcohol program regulations.

Print Name

Sign Name

Date

Release and Consent Background Check

In connection with my application for employment with kmG Hauling, Inc. (Also known as kmG), I understand and agree that investigative inquiries are to be made on myself including, but not limited to, consumer credit, criminal history, motor vehicle history, educational transcripts, and other reports of any nature and type, including information into and on the public domain and or website, such as Facebook, LinkedIn, Indeed, or any other sites that I have information about myself listed. These sites can be governed by Federal, State, Local, and/or private entities. These reports will include information as to my character, work, habits, performance, and experience with reason for termination of past employment.

I understand and agree that kmG can and will be requesting information from various Federal, State, and Local agencies that maintain records concerning my past activities related to my criminal history, driving history, credit history, education history, and other experiences.

I authorize without reservation all corporations, companies, credit agencies, persons, educational institutions, law enforcement agencies, and former employers to release information they may have about me, and release them from any liability and responsibility for doing so.

Further, I authorize the procurement of an investigative consumer report related to me and acknowledge my understanding that such report may contain information as to my background, mode of living, character, and person reputation.

This authorization, in original and/or copy form, shall be valid for this and any future reports that kmG may request.

I hereby authorize investigation of all statements made by me with no liability arising there from.

Print Name

Date

Signature

Applicant's Statement

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

I authorize investigation of all statements contained in this application for employment as necessary in arriving at an employment decision. I understand that this application is not and intended to be a contract of employment. In the event of employment, I understand that false or misleading information given in my application, interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of kmG Hauling, Inc.

Print Name

Date

Signature