APPLICATION FOR EMPLOYMENT

General Application (not for CDL)

Equal Opportunity Employer

(Applicants are not required to provide any information on this form that is prohibited by Federal, state or local law)

Please Print in Ink - Application Must be Completed in Full Even if Submitting a Resume

PERSONAL & GENERAL INFORMATION

Name (print) Last Name First Name Address	me MI Other Teleph E-Mail Addres Zip Code Earnings Expected \$	one No. () one No. () ss:
No. Street City State Position or Type of Position Desired:	Zip Code E-Mail Addres	
City State Position or Type of Position Desired:	Zip Code Earnings Expected \$	SS:
Position or Type of Position Desired: Are you able to perform the essential functions of the job y If no, please explain:	Earnings Expected \$	
Are you able to perform the essential functions of the job y If no, please explain:		
If no, please explain:		per
	ou are applying for, with or without reasonable accommodati	on? 🗆 Yes 🗆 No
Are you 18 years of age or older? □ Yes □No	Applying for (check all that apply) Full-Time	
Have you ever been employed by West Side Transport, Inc,	West Side Salvage, West Side Grain Sales and/or West Side	
If yes, where and in what capacity?		то:
How did you learn about West Side Salvage, Inc. and any of □ Advertisement □ Friend □ Relative □ Work Force De		□ Other
Names of Friends Employed by West Side Salvace	Names of Relatives Employed by West Side	Salvage
	or traffic offense? □ Yes □ No If yes, please explain an	
and rehabilitation will be considered. Have you ever been discharged or asked to resign from ar	ment. Factors such as age at the time of the offense, date only employment? \Box Yes \Box No If yes, please explain:	
Days and hours available to work (If employed I will notify		
Day Sunday Monday Start	Tuesday Wednesday Thurs	sday Friday Saturday
End		
Are you available to work overtime?	,	
applicants for employment in accordance with all Fe	mployer. It is our policy to provide and promote eq deral, state and local laws and regulations governing p e, color, creed, religion, sex, national origin, age, ance	personnel activities. No person will be

				Educatio	on & Trainir	ng		
Image: School (Indicate GED If Ight School (Indicate GED If genetate School Image: Genetate School Image: GenetateSchool Image: GenetateSchool <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>								
applicable)		School Name						Grade Poin Average
College	• ·							
Correspondence • Night Correspondence Correspondence • Night Correspondence • Night Correspondence Correspondence • Night Correspondence								
School	Graduate School							
Vocational (Include copy of certification) Describe any academic honors, scholarships, offices held, extracurricular activities, etc. (You need not disclose membership in organizations that may reveal information re race, color, creed, sex, religion, national origin, ancestry, age, disability, veteran status or any other protected status) MILITARY SERVICE: Have you served in the U.S. Armed Service? Yes No If yes, which branch?								
race, color, creed, sex, religion, national origin, ancestry, age, disability, veteran status or any other protected status) MILITARY SERVICE: Have you served in the U.S. Armed Service? Yes No If yes, which branch? Dates: From: Describe any job related training or experience in the military:	Vocational (Include copy of							
Dates: From: Describe any job related training or experience in the military:							s that may reveal inform	ation regarding
bates: From: Describe any job related training or experience in the military:								
Professional Licenses, Certificates, Registrations or Memberships Held:	/ILITARY SERVICE: Have you	served in the U.S. Arn	ned Service? [🗆 Yes 🗆 No l	f yes, which branch?	?		
Include number, where issued, effective date, and expiration date. (You need not disclose membership in organizations that may reveal information regarding race, color, exer, religion, national origin, ancestry, age, disability, veteran status or any other protected status.) a.anguages read, written or spoken fluently other than English:	Dates: From:To:	Describe any job re	elated training o	or experience in th	e military:			
sex, religion, national origin, ancestry, age, disability, veteran status or any other protected status.)	Professional Licenses, Certifica	tes, Registrations or M	emberships He	eld:				
Describe any other experience, skills, specialized courses, training, seminars, apprenticeships or other qualifications or skills you believe should be considered by West Sic Transport in evaluating your qualifications for employment: Courses and/or Training not shown elsewhere in this application: Courses and/or Training pot shown elsewhere in this application: Courses and/or Training not shown elsewhere in this application: Courses and/or Training not shown elsewhere in this application: Courses and/or Training job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training on the experience of the provision of the sperience of the provision of the sperience of the sperience of the provision of the sperience of the sperience of the provision of the sperience of the sperience of the provision of the sperience of the spe						organizations that may reveal into	ormation regarding race,	color, creed,
Transport in evaluating your qualifications for employment: Courses and/or Training not shown elsewhere in this application: Courses and/or Training not shown elsewhere in this application: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you have and the amount and type of experience you have: Check and the amount and type of experience you have: Check and the amount and type of experience you have: Check and the amount and type of experience you have: Check and the amount and type of experience you have: Check and the amount and type of experience you have: Check and the amount and	Languages read, written or spo	ken fluently other than	English:					
Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Equipment Operator General Labor Grain or Elevator Management Payroll Purchasing Secretarial Sales (Non-Transportation) Supervision Software/Hardware PC Skills Other For each item checked, please describe in detail the amount and type of experience you have:				eminars, apprentio	ceships or other qua	lifications or skills you believe she	ould be considered by W	Vest Side
Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience: Check all that apply regarding is a secret and a secret and the amount and type of experience you have: Check and	Courses and/or Training not she	own elsewhere in this a	pplication:					
Check all that apply regarding job experience and/or training you have, including length of time you had on-the-job experience:								
Equipment Operator General Labor Grain or Elevator Management Payroll Purchasing Secretarial Sales (Non-Transportation) Supervision Software/Hardware PC Skills Other For each item checked, please describe in detail the amount and type of experience you have:			Gen	eral Abili	ties & Expe	erience		
□ Management □ Payroll □ Purchasing □ Secretarial □ Sales (Non-Transportation) □ Supervision □ Software/Hardware PC Skills □ Other For each item checked, please describe in detail the amount and type of experience you have:	Check all that apply regarding jo	ob experience and/or tr	aining you hav	e, including length	of time you had on-	the-job experience:		
For each item checked, please describe in detail the amount and type of experience you have:					on) 🗆 Supervision	□ Software/Hardware PC Skills	□ Other	
Please describe in detail your experience and proficiency with computer hardware and software, including specific software knowledge and skill:		-						
	Please describe in detail your e	xperience and proficier	ncy with compu	iter hardware and	software, including s	specific software knowledge and	skill:	

Transportation/Logistics Abilities & Experience

Check all that apply regarding job experience and/or training you have related to Transportation and/or Logistics, including length of time you had on-the-job experience:

Logs/Driver Log Auditing 🗆 Rating & Billing 🗆 Safety 🗆 Transportation Sales 🗆 Transportation Payroll 🗆 Truck Brokerage Operations 🗆 Other (Describe Below)

For each item checked, please describe the amount and type of experience you have in detail:

Employment History

Provide your full employment record, starting with your current or most recent employment, including U.S. Military Service, full-time and part- time employment. Attach an additional sheet if more space is necessary. If any employment was under a different name, indicate that name. Any periods of employment must include name, address and phone number of a person who can verify the information you have submitted. Do not exclude any employment. West Side Salvage, Inc. reserves the right to contact all listed employers, except as noted below.

Account for any period of time since leaving school (high school or college) that you were not working:

From	То	Reason
Month/Year:	Month/Year:	
Month/Year:	Month/Year:	
Month/Year:	Month/Year:	

Employer 1			
Name and Type of Company:			From: To:
Address: Street			Phone (Area Code Starting Rate of Pay:
City	State	Zip Code	Current or Ending Rate of Pay:
Position Held:			Hours per Week:
Name and Title of Immediate Supervisor:			Contact Information: Phone #
Reason for Leaving (if still employed, why do you	wish to leave?):		
May we contact this employer?	No		

Name and Type of Company:Adress:			Phone () -	<u>.</u>
Street			Area Code Starting Rate of Pay:	
City	State	Zip Code	Current or Ending Rate of Pay:	
Position Held:			Hours per Week:	
Name and Title of Immediate Supervisor:			Contact Information:	Phone #
Describe your job duties, including number and type of emplo				
Reason for Leaving (if still employed, why do you wish to lea	ve?):			
May we contact this employer?				
Employer 3				
Name and Type of Company:			From: To:	
Address: Street			Phone (Area Code	<u> </u>
	Ctata	7in Code	Starting Rate of Pay:	
City	State	Zip Code	Current or Ending Rate of Pay:	
Position Held:			Hours per Week:	
Name and Title of Immediate Supervisor:			Contact Information:	Phone #
Describe your job duties, including number and type of emplo	oyees supervised:			
Describe your job duties, including number and type of emplo	oyees supervised:			
Describe your job duties, including number and type of emplo Reason for Leaving:	oyees supervised:			
Describe your job duties, including number and type of emplo	oyees supervised:		From: To:	Phone #
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Describe your job duties, including number and type of emplorements of the second seco	oyees supervised:	Zip Code	From: To: Phone (Phone #

References

Note: At least three references must be business or professionally related that know your work performance

1	Name:	Occupation/Business:	Phone Contact #: [] Business: [] Cell: [] Home:
Add	lress:	City/State:	Zip Code:
	Business Personal	Relationship:	How Long Known:

2 Name:	Occupation/Business:	Phone Contact #: [] Business: [] Cell: [] Home:	
Address:	City/State:	Zip Code:	
[] Business [] Personal	Relationship:	How Long Known:	

3	Name:	Occupation/Business:	Phone Contact #: [] Business: [] Cell: [] Home:
Add	ress:	City/State:	Zip Code:
	Business Personal	Relationship:	How Long Known:

4	Name:	Occupation/Business:	Phone Contact #: []Business: []Cell: []Home:
Add	ress:	City/State:	Zip Code:
	Business Personal	Relationship:	How Long Known:

5	Name:	Occupation/Business:	Phone Contact #: [] Business: [] Cell: [] Home:
Add	ress:	City/State:	Zip Code:
[] Business [] Personal		Relationship:	How Long Known:

Conditions of employment are stated below.

Please read carefully before you sign and submit this application to West Side Salvage, Inc. Direct any questions you may have regarding this statement to the Human Resources Department

I CERTIFY THAT ALL INFORMATON AND ANSWERS GIVEN BY ME ON THIS APPLICATION, OR ON ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS ARE TRUE, ACCURATE AND COMPLETE. I UNDERSTAND THAT THE FALSIFICATION, MISPRESENTATION OR OMMISSION OF FACT ON THIS APPLICATION OR ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT IF I AM ALREADY EMPLOYED, REGARDLESS OF WHEN OR HOW SUCH INFORMATION IS DISCOVERED.

I understand and agree that nothing contained in this employment application, any accompanying or required documents, or in the granting of an interview is intended to create a contractual relationship, either expressed or implied, between me and West Side Salvage, Inc. for either employment or the provision of any benefits.

I understand that if offered a position with West Side Salvage, Inc., I am subject to a pre-employment drug/alcohol screening as a condition of employment. I hereby consent to the collection of a breath alcohol test and/or urine sample by the medical facility chosen by West Side Salvage, Inc. for testing of the presence of alcohol and/or non-prescribed illegal substances. I understand and agree that a positive test result for alcohol and/or non-prescribed illegal substances based upon this drug/alcohol screening, or any refusal to cooperate with or attempt to affect the results of such drug/alcohol screening test will disqualify me from further consideration for employment by West Side Salvage, Inc., or if already employed by West Side Salvage, Inc., be cause for my immediate termination of employment. I understand and agree that if I am hired, I will be subject to drug/alcohol testing under West Side Salvage, Inc.'s Drug-Free Workplace Policy in effect at the time of my employment or as it may change from time to time during my employment.

If I am hired by West Side Salvage, Inc., I agree to abide by any and all of the West Side Salvage, Inc.'s policies, procedures, rules, regulations, and guidelines governing my employment in effect at the time of my hire and thereafter, and as such may change from time to time during my employment and, if applicable, after my employment terminates. I understand and agree that such abiding is a condition of employment. I further understand and agree that West Side Salvage, Inc., and all of its representatives or agents shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, or otherwise change all policies, procedures, rules, regulations, guidelines, documents, and/or benefits or other terms and conditions of employment from time to time with or without notice to me.

In the event I am hired by West Side Salvage, Inc., I further understand and agree that my employment with West Side Salvage, Inc. will be AT WILL, for no specified duration, and may be terminated with or without cause, with or without notice, at any time, at the option of either West Side Salvage, Inc. or me. I further understand and agree that no promise, representation, statement, document, policy, procedure, or agreement contrary to the foregoing, whether oral or written, by any representative or agent of West Side Salvage, Inc., at any time, can constitute a contract of employment, either expressed or implied, between me and West Side Salvage, Inc. for any length of time or contrary to the foregoing, except as mutually agreed upon in writing between the President, CEO & CFO of West Side Salvage, Inc. and me, and signed by both parties.

I acknowledge that I have read and understand the above statements, and hereby authorize West Side Salvage, Inc., its representatives, agents or vendors to investigate, be supplied with, and obtain information about any and all statements and information contained in this application and any accompanying or required documents. I understand and agree that information to be obtained or supplied about me includes, without limitation, information concerning my character, general reputation, mode of living, criminal record, work habits, financial responsibility, job performance, experience, employment, and/or reasons for employment termination. I understand that if West Side Salvage, Inc. requests an investigative consumer report, I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. In so authorizing, I hereby release and hold harmless any person or organization, including but not limited to any and all schools, employers, references, courts and/or anyone else who supplies information about me to West Side Salvage, Inc. and/or any of its representatives, agents or vendors, and also release and hold harmless West Side Salvage, Inc., and/or any and all liability, claims and damages of whatever kind and nature that could result by reason of providing or obtaining such information, and/or having an employment decision based on making an investigation and/or utilizing such information to do so.

I understand this application is considered current for three months from the date entered on the first page herein. If I wish to be considered for employment after this period I must complete and submit a new application.

I further acknowledge that by signing this application I do so willingly and voluntarily.

Signature of Applicant:

Date:

Applicant's Printed Name: