

SH Logistics, LLC dba SH Transport  
Website: www.shlogisticsllc.com  
Fax: 866-237-1349  
Email: applications@shlogisticsllc.com

Phone: 303-719-9521, 330-737-7702  
Address: 10800 E Bethany dr STE 575, Aurora, CO 80014

### APPLICATION FOR EMPLOYMENT

Select position applying for:

Experience Level:

How many moving violations in the last

Can you provide a driving record?

If no, reason:

Have you ever been convicted for a crime?

If yes, please attach a statement with evidence.

### PERSONAL INFORMATION

Name: First

Last

E-mail:

Phone: (area) number

SSN: [E-SIGNATURE REQUIRED]

Current Address Street Address

Current Address Street Address Line 2

Current Address City

Current Address State / Province / Region

Current Address Postal / Zip Code

Current Address Country

Current Address County

Current Address How long at this address

Previous Address 1 Street Address

Previous Address 1 Street Address Line

Previous Address 1 City

Previous Address 1 State / Province / Region

Previous Address 1 Postal / Zip Code

Previous Address 1 Country

Previous Address 1 County

Previous Address 1 How long at this address

Previous Address 2 Street Address

Previous Address 2 Street Address Line

Previous Address 2 City

Previous Address 2 State / Province / Region

Previous Address 2 Postal / Zip Code

Previous Address 2 Country

Previous Address 2 County

Previous Address 2 How long at this address

Previous Address 3 Street Address

Previous Address 3 Street Address Line

Previous Address 3 City

Previous Address 3 State / Province / Re

Previous Address 3 Postal / Zip Code

Previous Address 3 Country

Previous Address 3 County

Previous Address 3 How long at this add

**DRIVER'S LICENSE & CDL INFORMATION**

CDL Holder:

DL #:

DL Issued on:

State:

DL expires on:

DOB:

CDL Endorsements (list):

Have you applied/worked for this compa

If yes, when?

**WORK HISTORY (Current + Prior)**

Employer #1 - Company Name

From

To

May we contact?

Phone

Supervisor First

Supervisor Last

Position

Reason for leaving

Employer #2 - Company Name

From

To

May we contact?

Phone

Supervisor First

Supervisor Last

Position

Reason for leaving

Employer #3 - Company Name

From

To

May we contact?

Phone

Supervisor First

Supervisor Last

Position

Reason for leaving

Employer #4 - Company Name

From

To

May we contact?

Phone

Supervisor First

Supervisor Last

Position

Reason for leaving

**AUTHORIZATION AND AGREEMENT**

Printed Name - First

Last

Address

E-Signature (REQUIRED)

Signed Date

## DRIVER AUTHORIZATION TO RELEASE RECORDS

### Consumer Report Disclosure and Release

In connection with your employment or application for employment with SH Logistics, LLC dba SH Transport, consumer reports may be requested from USIS Commercial Services (USIS). These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, academic history, professional credentials, and drugs/alcohol use. Such reports may contain public record information concerning your driving record, workers compensation claims, credit, bankruptcy proceedings, criminal records, etc., from federal, state and other agencies which maintain such records; as well as information from USIS concerning previous driving record requests made by others from such state agencies and state provided driving records.

You have the right to make a request to USIS, upon proper identification, to request the nature and substance of all information in its files on you at the time of your request, including the source of information and the recipients of any reports on you that USIS has previously furnished within the three-year period preceding your request. USIS may be contacted by mail at P.O Box 33181, Tulsa, Oklahoma, 74153, or by phone at (800)381-0645.

I AUTHORIZE, WITHOUT RESERVATION, USIS, AND ANY PARTY OR AGENCY CONTACTED BY USIS, TO FURNISH THE ABOVEMENTIONED INFORMATION. THIS AUTHORIZATION DOES NOT APPLY TO DRUG AND ALCOHOL INFORMATION OBTAINED UNDER PART 1.

I hereby consent to your obtaining the above information from USIS, and I agree that such information which USIS has or obtains, and my employment history (not DOT Drug and Alcohol information without a specific consent by me) with you if I am hired will be supplied by USIS to other companies which subscribe to USIS. I hereby authorize procurement of consumer report(s). If hired or contracted, this authorization, for reports covered by this release only, shall remain on file and shall serve as ongoing authorization for you to procure consumer reports at any time during my employment or contract period.

## PSP NOTICE

### Notice to California Applicants

Under California law, the consumer reports we order on you for employment purposes within the State Of California are defined as investigative consumer reports. These reports may contain information on your character, general reputation, personal characteristics and mode of living. Under section 1786.22 of the California Civil Code, you may view the file maintained on you by USIS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at USIS in person or by mail. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

## DRUG & ALCOHOL MISUSE POLICY

### Drug & Alcohol Misuse Policy

This Drug Abuse/Alcohol Misuse Policy statement is committed to providing a safe work environment and fostering the health and wellbeing of its employees. That commitment is jeopardized when any employee misuses alcohol or uses illegal drugs. Therefore, the following alcohol misuse/ drug abuse policy applies to all personnel employed by, both DOT regulated and non-DOT. It is a company policy, not a DOT policy. All employees must read and acknowledge this policy as a condition of employment with this company.

1. It is a violation of company policy for any employee to possess, sell, trade, or offer for sale illegal drugs. It is a violation also, for any employee to report to work under the influence of drugs or while having illegal drugs present in any of his/her body fluids.
2. It is also a violation of this policy for any employee to report to work under the influence of prescription drugs that have been used illegally, or in an amount or manner other than prescribed by a physician.

... (full policy continues as provided in the original content; please keep the verbatim content in the final PDF)

## SIGNATURES / ACKNOWLEDGEMENTS

By typing your name in the E-Signature fields below you are acknowledging and agreeing to the statements above

Printed Name - First

E-Signature (Authorization and Agreement)

E-Signature (Driver Authorization to Relinquish License)

E-Signature (Drug & Alcohol Policy)

Signed Date