



NOTICE TO APPLICANTS:

**RIO GRANDE CO. HAS A
ZERO TOLERANCE
SUBSTANCE ABUSE POLICY**

**APPLICANTS WILL BE
TESTED**

Permission for Release of Motor Vehicle Records

I hereby authorize the release of my Motor Vehicle Records from the State of _____.

Information regarding Colorado Driver's License: Colorado Motor Vehicle Records are maintained by the Colorado Department of Revenue, Motor Vehicle Division pursuant to the Driver's Privacy Protection Act (18 USC 2721) and Colorado law (42-72-204, 42-1-206, 42-3-125 CRS). Record information available at Drivers License offices and 1881 Pierce St. All other requests available only at 1881 Pierce St., Lakewood, CO.

Printed Name: _____

Signature: _____ Date: _____

Date of Birth: _____ Driver's License Number: _____

State Driver's License Issued: _____ License Type: _____

Purpose for which records are released: _____

Requestor's Name: Linda Kinter

Company: Mountain States Employers Council

Address: 1799 Pennsylvania Street

City: Denver State: Colorado Zip code: 80203

FAIR CREDIT REPORTING ACT

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

As an applicant for employment or a current employee of **Rio Grande Co.**, you are a consumer with rights under the Fair Credit Reporting Act. In the event any of the following circumstances exist, **Rio Grande Co.** may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you when: (1) considering your application for employment, (2) making a decision whether to offer you employment, (3) deciding whether to continue your employment (if you are hired), or (4) making other employment-related decisions directly affecting you.

Our *consumer reporting agency* is Mountain States Employers Council, Inc. at PO Box 539, Denver, CO 80201, toll free 800.884.1328, which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly assembles or evaluates consumer information on consumers for the purpose of furnishing consumer reports to others, such as **Rio Grande Co.**

A *consumer report* means any written, oral or other communication of any information by a consumer reporting agency bearing on your character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for employment purposes.

An *investigative consumer report* means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associates reported on or with others with whom you are acquainted or who may have knowledge concerning any such items of information.

In the event an investigative consumer report is prepared, you may request additional disclosures regarding the nature and scope of the investigation requested as well as a written summary of your rights under the Fair Credit Reporting Act.

AUTHORIZATION REGARDING BACKGROUND INVESTIGATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of these documents.

Rio Grande Co. ("the Company") may obtain information about you for employment purposes from the following consumer reporting agency ("the Agency"), Mountain States Employers Council, Inc., PO Box 539, Denver, CO 80201, toll free 800-884-1328.

By signing below, I hereby voluntarily authorize **Rio Grande Co.**, to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my employment at **Rio Grande Co.** I understand that I have rights under the Fair Credit Reporting Act, including the rights discussed above.

I voluntarily authorize all persons, including current and former employers and supervisors, educational institutions, law enforcement agencies, motor vehicle departments, and municipal, state, and federal courts to release information they may have about me to **Rio Grande Co.** I understand that if I am employed by **Rio Grande Co.**, this authorization shall remain in effect throughout my employment. This report may be delivered in either written or electronic form.

California applicants or employees only:

Please check this box if you would like to receive a copy of an investigative consumer report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law. By signing below you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW.

Massachusetts, and New Jersey applicants or employees only:

You have the right to inspect and promptly receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly.

Minnesota applicants or employees only:

You have the right, upon written request to the Agency, to receive a complete and accurate disclosure of the nature and scope of any consumer report. The Agency must make this disclosure within five days of receipt of your request or of the Company's request for the report, whichever is later. Please check the box if you would like to receive a copy of a consumer report if one is obtained by the Company.

New York applicants or employees only:

You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.

Oklahoma applicants or employees only:

Please check this box if you would like to receive a copy of any report if one is obtained by the Company.

Pennsylvania applicants or employees only:

By signing below you acknowledge that consideration of a criminal record will be tailored to the requirements of the job.

Washington applicants or employees only:

You have the right to receive a complete and accurate disclosure of the nature and scope of any investigative consumer report as well as a written summary of your rights and remedies under Washington law.

Signature

Date

Printed Name

Email Address

Social Security Number

Date of Birth

WAIVER
 Authorization to obtain records
 and other information for employment purposes

To the applicant: This form must be filled out completely. Leave no blanks. Direct any questions to the employment office. **READ ALL INFORMATION CAREFULLY BEFORE SIGNING.**

I hereby authorize RIO GRANDE CO. (Potential employers name) to utilize the services of an outside agency to make an investigation of my personal employment history, education and financial and credit records. I understand that these investigations will include information of public record, which could include DMV records; civil and criminal court records; county, state and federal tax liens; notices of default and bankruptcies, and other records as may be appropriate. Previous employment references will also be verified. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement or omission of information on my application form may result in my termination. I further understand that this application is not intended to be a contract of employment, nor does this application serve as an obligation in any way to employ me or not to employ me.

I hereby fully waive any rights or claims I have or may have against all current and/or former employers, and their agents, employees, and representatives and damages that may directly or indirectly result from the use, disclosure or release of any information by any person or party, whether such information is favorable or unfavorable to me. I further waive any claim against you and any outside agency utilized by you as a result of any information which is obtained in this investigation.

Signature _____ Date _____

A photocopy of this authorization shall be deemed an original and shall be accepted as such by every person.

PLEASE PRINT CLEARLY

Name <i>Last</i>	First	Middle
Other Name(s) Used		When Name(s) Used
Address		
City/State/Zip		
Telephone	Social Security Number	Date of Birth
Drivers License Number	Type	State

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Job Applied for _____ Today's Date _____

Are you seeking: Full-time Part-time Temporary employment?

When could you start work? _____

Last Name

First Name

Middle Name

Telephone Number

Present Street Address

City

State

Zip Code

Are you 18 years of age or older? Yes No
(If you are hired, you may be required to submit proof of age.)

Social Security # _____

If hired, can you furnish proof you are eligible to work in the U.S.? Yes No

Have you ever applied here before? Yes No If yes, when? _____

Were you ever employed here? Yes No If yes, when? _____

Have you ever been convicted of any law violation? (Include any plea of "guilty" or "no contest." Exclude minor traffic violations.) Yes No

If yes, give details _____
(A conviction will not necessarily disqualify an applicant for employment.)

If employed, do you expect to be engaged in any additional business or employment outside of our job? Yes No

If yes, give details _____

EDUCATION

List Name and Address of Schools	Number of Years Completed	Diploma/ Degree/ Certificate
High School or GED: _____ _____ _____		
College or University: _____ _____ Subjects Studied: _____ _____		
Vocational or Technical: _____ _____ Subjects Studied: _____ _____		

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying? _____

What machines or equipment can you operate that are related to the job for which you are applying? _____

For Driving Jobs Only: Do you have a valid driver's license? Yes No

Driver's License Number _____ Class of License _____ State Licensed In _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes No

If yes, give details: _____

List professional, trade, business or civic activities and offices held.
(Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability, or other protected status.)

WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Note: A job offer may be contingent upon acceptable references from current and former employers.

Name of Employer	Supervisor(s)
Address	Employed From (mo/yr) / To(mo/yr) /
City, State, Zip Code	Pay Start \$ Final \$
Telephone	
Title	Reason for Leaving
Duties	
Name of Employer	Supervisor(s)
Address	Employed From (mo/yr) / To(mo/yr) /
City, State, Zip Code	Pay Start \$ Final \$
Telephone	
Title	Reason for Leaving
Duties	
Name of Employer	Supervisor(s)
Address	Employed From (mo/yr) / To(mo/yr) /
City, State, Zip Code	Pay Start \$ Final \$
Telephone	
Title	Reason for Leaving
Duties	
Name of Employer	Supervisor(s)
Address	Employed From (mo/yr) / To(mo/yr) /
City, State, Zip Code	Pay Start \$ Final \$
Telephone	
Title	Reason for Leaving
Duties	

REFERENCES

Have you worked or attended school under any other names? Yes No

If yes, give names: _____

Are you presently employed? Yes No

If yes, whom do you suggest we contact? _____

Have you ever been fired from a job or asked to resign? Yes No

If yes, please explain: _____

Give three references, not relatives or former employers.

Name	Address	Phone

AFFIDAVIT, CONSENT AND RELEASE

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____

This application for employment will remain active for a limited time.
Ask the organization's representative for details.



THE PREDICTIVE INDEX[®]
 Organization Survey
 Checklist

Name _____ Date _____

Occupation _____

DIRECTIONS: Please read the words in the list below and check those that you feel describe the way you are expected to act by others.

- | | | | | | |
|---------------------|--------------------------|---------------------|--------------------------|---------------------|--------------------------|
| Helpful | <input type="checkbox"/> | Esteemed | <input type="checkbox"/> | Calm | <input type="checkbox"/> |
| Relaxed | <input type="checkbox"/> | Worrying | <input type="checkbox"/> | Popular | <input type="checkbox"/> |
| Exciting | <input type="checkbox"/> | Sentimental | <input type="checkbox"/> | Polite | <input type="checkbox"/> |
| Assertive | <input type="checkbox"/> | Adventurous | <input type="checkbox"/> | Dynamic | <input type="checkbox"/> |
| Patient | <input type="checkbox"/> | Easy Going | <input type="checkbox"/> | Good-Humored | <input type="checkbox"/> |
| Conscientious | <input type="checkbox"/> | Unassuming | <input type="checkbox"/> | Escapist | <input type="checkbox"/> |
| Sophisticated | <input type="checkbox"/> | Good mixer | <input type="checkbox"/> | Generous | <input type="checkbox"/> |
| Persistent | <input type="checkbox"/> | Agreeable | <input type="checkbox"/> | Unobtrusive | <input type="checkbox"/> |
| Earnest | <input type="checkbox"/> | Well-liked | <input type="checkbox"/> | Daring | <input type="checkbox"/> |
| Outstanding | <input type="checkbox"/> | Docile | <input type="checkbox"/> | Tolerant | <input type="checkbox"/> |
| Sympathetic | <input type="checkbox"/> | Demanding | <input type="checkbox"/> | Nice | <input type="checkbox"/> |
| Loyal | <input type="checkbox"/> | Charitable | <input type="checkbox"/> | Compelling | <input type="checkbox"/> |
| Self-starter | <input type="checkbox"/> | Persuasive | <input type="checkbox"/> | Resolute | <input type="checkbox"/> |
| Conventional | <input type="checkbox"/> | Careful | <input type="checkbox"/> | Tranquil | <input type="checkbox"/> |
| Eloquent | <input type="checkbox"/> | Satisfied | <input type="checkbox"/> | Cultured | <input type="checkbox"/> |
| Cynical | <input type="checkbox"/> | Understanding | <input type="checkbox"/> | Dominant | <input type="checkbox"/> |
| Passive | <input type="checkbox"/> | Spirited | <input type="checkbox"/> | Respectful | <input type="checkbox"/> |
| Gentle | <input type="checkbox"/> | Congenial | <input type="checkbox"/> | Nonchalant | <input type="checkbox"/> |
| Brave | <input type="checkbox"/> | Obedient | <input type="checkbox"/> | Flexible | <input type="checkbox"/> |
| Appealing | <input type="checkbox"/> | Cheerful | <input type="checkbox"/> | Attractive | <input type="checkbox"/> |
| Thoughtful | <input type="checkbox"/> | Obstinate | <input type="checkbox"/> | Trusting | <input type="checkbox"/> |
| Self-assured | <input type="checkbox"/> | Convincing | <input type="checkbox"/> | Eager | <input type="checkbox"/> |
| Steady | <input type="checkbox"/> | Responsive | <input type="checkbox"/> | Shy | <input type="checkbox"/> |
| Competitive | <input type="checkbox"/> | Neighorly | <input type="checkbox"/> | Fussy | <input type="checkbox"/> |
| Fashionable | <input type="checkbox"/> | Selfish | <input type="checkbox"/> | Versatile | <input type="checkbox"/> |
| Neat | <input type="checkbox"/> | Reserved | <input type="checkbox"/> | Amiable | <input type="checkbox"/> |
| Audacious | <input type="checkbox"/> | Serious | <input type="checkbox"/> | Diplomatic | <input type="checkbox"/> |
| Polished | <input type="checkbox"/> | Persevering | <input type="checkbox"/> | Self centered | <input type="checkbox"/> |
| Fearful | <input type="checkbox"/> | | | Consistent | <input type="checkbox"/> |

Organization Survey
Checklist

Form IV

Name _____

Page 2

START on other side of page.

DIRECTIONS: Continue by reading the words in the list below, now checking those that you yourself believe really describe you.

- | | | | | | |
|---------------------|--------------------------|---------------------|--------------------------|---------------------|--------------------------|
| Helpful | <input type="checkbox"/> | Esteemed | <input type="checkbox"/> | Calm | <input type="checkbox"/> |
| Relaxed | <input type="checkbox"/> | Worrying | <input type="checkbox"/> | Popular | <input type="checkbox"/> |
| Exciting | <input type="checkbox"/> | Sentimental | <input type="checkbox"/> | Polite | <input type="checkbox"/> |
| Assertive | <input type="checkbox"/> | Adventurous | <input type="checkbox"/> | Dynamic | <input type="checkbox"/> |
| Patient | <input type="checkbox"/> | Easy Going | <input type="checkbox"/> | Good-Humored | <input type="checkbox"/> |
| Conscientious | <input type="checkbox"/> | Unassuming | <input type="checkbox"/> | Escapist | <input type="checkbox"/> |
| Sophisticated | <input type="checkbox"/> | Good mixer | <input type="checkbox"/> | Generous | <input type="checkbox"/> |
| Persistent | <input type="checkbox"/> | Agreeable | <input type="checkbox"/> | Unobtrusive | <input type="checkbox"/> |
| Earnest | <input type="checkbox"/> | Well-liked | <input type="checkbox"/> | Daring | <input type="checkbox"/> |
| Outstanding | <input type="checkbox"/> | Docile | <input type="checkbox"/> | Tolerant | <input type="checkbox"/> |
| Sympathetic | <input type="checkbox"/> | Demanding | <input type="checkbox"/> | Nice | <input type="checkbox"/> |
| Loyal | <input type="checkbox"/> | Charitable | <input type="checkbox"/> | Compelling | <input type="checkbox"/> |
| Self-starter | <input type="checkbox"/> | Persuasive | <input type="checkbox"/> | Resolute | <input type="checkbox"/> |
| Conventional | <input type="checkbox"/> | Careful | <input type="checkbox"/> | Tranquil | <input type="checkbox"/> |
| Eloquent | <input type="checkbox"/> | Satisfied | <input type="checkbox"/> | Cultured | <input type="checkbox"/> |
| Cynical | <input type="checkbox"/> | Understanding | <input type="checkbox"/> | Dominant | <input type="checkbox"/> |
| Passive | <input type="checkbox"/> | Spirited | <input type="checkbox"/> | Respectful | <input type="checkbox"/> |
| Gentle | <input type="checkbox"/> | Congenial | <input type="checkbox"/> | Nonchalant | <input type="checkbox"/> |
| Brave | <input type="checkbox"/> | Obedient | <input type="checkbox"/> | Flexible | <input type="checkbox"/> |
| Appealing | <input type="checkbox"/> | Cheerful | <input type="checkbox"/> | Attractive | <input type="checkbox"/> |
| Thoughtful | <input type="checkbox"/> | Obstinate | <input type="checkbox"/> | Trusting | <input type="checkbox"/> |
| Self-assured | <input type="checkbox"/> | Convincing | <input type="checkbox"/> | Eager | <input type="checkbox"/> |
| Steady | <input type="checkbox"/> | Responsive | <input type="checkbox"/> | Shy | <input type="checkbox"/> |
| Competitive | <input type="checkbox"/> | Neighorly | <input type="checkbox"/> | Fussy | <input type="checkbox"/> |
| Fashionable | <input type="checkbox"/> | Selfish | <input type="checkbox"/> | Versatile | <input type="checkbox"/> |
| Neat | <input type="checkbox"/> | Reserved | <input type="checkbox"/> | Amiable | <input type="checkbox"/> |
| Audacious | <input type="checkbox"/> | Serious | <input type="checkbox"/> | Diplomatic | <input type="checkbox"/> |
| Polished | <input type="checkbox"/> | Persevering | <input type="checkbox"/> | Self centered | <input type="checkbox"/> |
| Fearful | <input type="checkbox"/> | | | Consistent | <input type="checkbox"/> |

Please turn in your paper.