



Michelsen
packaging company

202 NORTH 2ND AVENUE, YAKIMA, WASHINGTON 98902 (509) 248-6270 FAX (509) 249-4018

JOB DESCRIPTION
COMPANY TRUCK DRIVER

Position Reports to: Warehouse Manager
Department: TrafficNon-Exempt

GENERAL SUMMARY

Operate Company vehicle to transport material as directed.

MAJOR FUNCTIONS

Drive gasoline or diesel-powered tractor-trailer combination (53' vans, double vans and flats) to a destination, applying knowledge of commercial driving regulations and skill in maneuvering the vehicle in difficult situations, such as narrow passageways and congested roadways.

Load/unload as necessary and tarp loads as required. Operate vehicles with strict adherence to commonly accepted Driver Safety Standards.

Responsible for monitoring condition of truck, trailers, and equipment including pre and post trip inspections for defects. Must provide required reports on truck, trailer, and equipment condition.

Maintain driver logs according to DOT/ICC regulations.

JOB SPECIFICATIONS

General Requirements: High school diploma or GED preferred to provide ability to maintain logs, forms, and reports and communicate effectively with customers. Hold a valid, Class A CDL license with Endorsement (T). Current copy of Medical long form. Pass NIDA drug/alcohol screen. Provide two prior employer references. Must have current three-year commercial abstract of driving record from the local Department of Licensing.

Driving Record Requirements: A clean motor vehicle record for the prior 3 years is preferred.

A. Applicants with two or more (prior 3 years) violations of any of the following combined violations will not be considered:

- Excessive speeding 15 miles per hour and over.
- Improper or erratic traffic lane changes.
- Following the vehicle ahead too closely.
- Applicants with three speeding violations 10 MPH and under will not be considered.
- Applicants with two speeding violations 10 MPH and under and any violation of A (above) will not be considered.
- Any violation of State or local traffic law associated with a fatal traffic accident will not be considered.

- Reckless driving as defined by State or local law or regulation, including but not limited to, offenses of driving a commercial motor vehicle in wanton disregard for the safety of persons or property will not be considered.

Experience: Two years' experience operating gasoline or diesel-powered tractor-trailer combination. If over 25, must have at least one year of consistent, documented over-the-road experience. If under 25, must have at least three years consistent, documented over-the-road experience.

Skills & Abilities: Must be knowledgeable of regulations of Interstate Commerce Commission, Department of Transportation and other regulatory bodies governing the transportation industry. Have general knowledge of tractor/trailer equipment, routine maintenance procedures, and safety requirements. Have a thorough knowledge of commodity weight distribution and trailer loading procedures. Must be able to read and fill out driver logs and usual and customary shipping and transportation documents. Ability to project positive, professional attitude.

Contact with others: Acts as a company representative while meeting with customers in all job-related capacities. Relays vital customer service information to immediate supervisor or managers as needed. Communicate as required with traffic clerk/dispatcher.

Work Direction over Others: None.

Supervision Received: Ability to work independently with little or no supervision. Must take direction from Traffic Manager and Dispatcher.

Pressure of Work: Must maintain positive attitude in difficult situations. Must comply with all pertinent regulations while meeting schedules and deadlines.

Scope: Directly affect profitability of trucking operation through effective communication with company traffic personnel and customers. Must ensure vehicle and equipment is operational so that schedules can be met and deliveries made.

Impact: Failure to perform tasks effectively and efficiently can lead to lost revenue for the company and driver.

Working Conditions: Must communicate orally and in writing and use phone as needed. Lift one or more tarps (approximately 75 pounds each) from ground to deck height of 52 inches and place, spread, and secure them over a load at a height of 14 feet. Must be able to throw straps. Push/pull on rollers or pallet jack up to a 3,000-pound pallet load in or out of a trailer of 33 feet in length. Stack cartons or other freight at heights ranging from floor to 9 feet high. Withstand bodily strain of 10 hours per day in the movements of the truck seat. Work up to 50 hours in a seven day work week. Must be able to drive in all weather; including chaining-up in the winter and driving over the pass. Observe and interpret mirror images quickly at a 90-degree reflection, 6 feet away. Enter and exit cabs and trailers at a height of 52 to 60 inches. Respond quickly, alertly, and safely to heavy traffic in metropolitan areas. Maneuver converter gear weighing approximately 2000 pounds.

The above statements are intended to describe the general nature and level of work being performed by people assigned to this job. They are not intended to be an exhaustive list of all responsibilities, duties and skills required.

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

The purpose of this application is to determine whether or not the applicant is qualified to operate Motor Carrier equipment according to the requirements of the Federal Motor Carrier Safety Regulations and Michelsen Packaging.

Instructions to Applicant

Please answer all questions. If the answer to any question is "No" or "None," do not leave the item blank, but write "No", "None" or N/A.

Name: _____ SSN#: _____ Date: _____

Telephone:(_____) _____ Age: _____ Date of Birth: _____

List you addresses of residency for the past 3 years:

Current Address: _____ City: _____ State: _____ Zip: _____ How long: _____

Previous Address: : _____ City: _____ State: _____ Zip: _____ How long: _____

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Employment Information

Are you related to anyone in our employ? ____ Yes ____ No If yes, describe: _____

Have you ever filed an application with us before? ____ Yes ____ No If yes, when: _____

Have you ever been employed with us before? ____ Yes ____ No If yes, give dates: _____

Are you currently employed? ___ Yes ___ No May we contact your present employer? ____ Yes ___ No

Date you can start work? _____ Are you looking for ____ Full Time -or- ____ Part Time?

Citizenship: Will you be able to provide proof of U.S. citizenship or an alien registration number and a visa permitting work in this country if hired? ____ Yes ____ No

Education:

High School / Degree ____ Yes ____ No ____ GED

College Experience _____

Special Driver Courses Taken _____

Correspondence Training _____

Armed Forces or other training: _____

Employment History

Present or last employer: _____ Phone: _____ Wage _____

Address: _____

From: _____ To: _____ Supervisor _____

Describe your job: _____

Reason for leaving: _____

Present or last employer: _____ Phone: _____ Wage _____
Address: _____
From: _____ To: _____ Supervisor _____
Describe your job: _____
Reason for leaving: _____

Present or last employer: _____ Phone: _____ Wage _____
Address: _____
From: _____ To: _____ Supervisor _____
Describe your job: _____
Reason for leaving: _____

Present or last employer: _____ Phone: _____ Wage _____
Address: _____
From: _____ To: _____ Supervisor _____
Describe your job: _____
Reason for leaving: _____

Driving Experience:

Type of Equipment: _____ From: _____ To: _____ Approximate number of miles: _____

Accident Record for past three (3) years:

Date of Accident: _____ Nature of Accident: _____ Location: _____ # of Fatalities: _____ # of People injured: _____

A) Have you ever been denied a license, permit or privilege to operate a motor vehicle? ___ Yes ___ No

B) Has any license, permit or privilege ever been suspended or revoked? ___ Yes ___ No

If the answer to A or B is YES, give details:

Can you perform the essential functions and meet the essential qualifications listed on the job description with or without reasonable accommodation? ___ Yes ___ No

Personal References

List three persons for reference, other than relatives, who have knowledge of your safety habits:

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

ACKNOWLEDGMENT AND CONSENT

To Be Read and Signed by Applicant

I hereby declare the information provided by me in this application is true and complete, and I understand that falsification of this information is grounds for refusal to hire or contract with me or for termination of my employment or contract. I authorize any of the persons or organizations identified by me in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damage which may result from furnishing such information to you. I authorize you to request, receive, and verify all information given in this application. I understand that information from previous employment histories, previous drug and alcohol test results, and my driving records will be obtained as part of the hiring process {in compliance with Section 604(b)(2)(A) of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter I of Public Law 104-208)}, and that I may not be offered a job or contract based on the information received and/or contained in a consumer report. In consideration for my employment as a company driver, I agree to conform to the rules and regulations of the company set forth in the company's employee and/or driver handbook and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by the employer at any time, at the employer's sole option and without any prior notice to me.

I acknowledge that, if I am employed by the employer, my employment will be at will, and may be terminated at any time, by the employer or by me, with or without cause.

Applicant Signature: _____

Date: _____

COMPANY DRIVER SUBSTANCE ABUSE CONSENT AND RELEASE FORM

Pursuant to the Federal Motor Carrier Safety Regulations (sections 391 and 394), 49 Code of Federal Regulations 40, and the Substance Abuse and Testing Policy of Michelsen Packaging, and in consideration of my application for employment as a driver, and, if selected by Michelsen Packaging, I hereby consent to submit to urine substance abuse and breath alcohol testing.

I acknowledge that the conduct of these tests does not create a physician-patient relationship. The results of these tests and any resulting related interviews, whether conducted because of new hire, reasonable suspicion, work related accident or injury, or for random driver testing, will be released to The Healthy Worker or other similar organization Michelsen Packaging has contracted with to provide testing services. After review by the service, the test results will be forwarded to Michelsen Packaging.

I acknowledge that the results of these tests and related interviews will be used by Michelsen Packaging in accordance with the above listed regulations and policies. A confirmed positive test will result in the individual being declared "Not medically qualified to operate a commercial motor vehicle." This will result in the rescission of an offer of employment and can result in disciplinary action up to and including termination of employment for an employee.

I understand that a "negative dilute" sample will be considered a positive result. A "dilute" urine sample will occur when water is added to the urine sample directly, or the person being tested consumes a significant quantity of liquid prior to the test. Any offer of employment or granting of contract will be withdrawn immediately.

This consent form will be valid during the term of my employment with Michelsen Packaging or, due to transfer, with any company that falls under the operation control of Michelsen Packaging. Such testing will occur throughout the term of my employment and association with the company and no such notice of tests need be required other than that which has been given with this notice.

Applicant Signature: _____

Date : _____

