

EMPLOYMENT APPLICATION



An Equal Opportunity Employer

ABOUT US...

CEMSTONE COMPANIES

Founded by the Becken family in 1927, Cemstone offers truly integrated and sustainable “concrete solutions” for its customers in the Upper Midwest and across the country.

Cemstone owns and operates a network of ready-mix concrete plants and aggregate facilities, which includes our sister companies, Cemstone Concrete Materials LLC in Southern Minnesota and Iowa and our Wisconsin locations - Cemstone Ready Mix, Inc. The company offers a full line of ready-mixed concrete, decorative concrete, high performance concrete, aggregate products, concrete masonry units, brick and decorative stone. Cemstone also provides professional grade supplies and materials through its network of Contractor Supply Stores.



Cemstone’s fleet of ready mix trucks and concrete booms deliver and place quality concrete for everything from residential driveways, to above grade walls in homes built with Insulating Concrete Form (ICF) technology, to high-rise commercial buildings and sports stadiums.

The company’s engineering services group includes a team of licensed engineers, geologists, certified field technicians and support staff to assist the design community from the development of a project to its completion.

Cemstone’s commitment to the environment helps define our culture and guides our business. We are a recognized leader in sustainable concrete technologies, such as pervious concrete, and the application of Leadership in Energy and Environmental Design (LEED®) practices.



AMCON CONCRETE PRODUCTS

For over 30 years Amcon Concrete Products has set the standard for quality and service to architects and building professionals in the upper Midwest. Founded in 1977, Amcon Concrete Products is one of the largest suppliers of quality block and architectural CMU projects across the upper Midwest.

TCC MATERIALS

In 1957, The Cemstone Companies began packaging pre-blended cement based building materials in Minnesota under the Handi Crete brand. In 1973, The Cemstone Companies purchased the Twin City Concrete Products Company (TCC) and its Minneapolis facility from Texas Industries, Inc. Operating under the original name; TCC built a manufacturing plant in St. Paul, MN in 1980. In the coming years, TCC added new production facilities in Iowa, South Dakota, North Dakota, Wisconsin, Minnesota and Nebraska. In 2006, the company began doing business as TCC Materials® to strategically align our growth and diversification in spec blended construction products servicing the building materials industry.

Today, TCC Materials offers a complete line of packaged concrete and masonry products to satisfy needs from the do-it-yourselfer to the professional contractor.

Quality products and service along with new and improved products continue to keep TCC Materials as the leader in the packaged concrete, sand and mortar industries in the Midwest.



In compliance with Federal and State equal employment opportunities laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability, or any other protected class.

A. PERSONAL INFORMATION

Name: _____ Phone: _____
Last First Middle

Email: _____

Driver's License No. _____ Issuing State: _____ Expiration: _____

Referred By: _____

Current Address: _____
Street City State Zip Years

Former Address(s): _____
(If less than 3 years) Street City State Zip Years

Address: _____
Street City State Zip Years

Have you ever been convicted of a felony? Yes No (Do not answer if you live or are applying to work in MN).

If yes, please explain: _____

Do you have a legal right to work in the U.S.? Yes No

B. POSITION DESIRED

1. _____ 2. _____

Date available for work: _____ Salary desired: _____ Per: _____

Ever applied to this company before? _____ Where? _____ When? _____

Are you a former employee? _____ Where? _____ When? _____

Relatives employed by this company? Name: _____ Location: _____

Are you employed now? _____ Do you wish to work: Temporary Part-time Full-time

C. REFERENCES (excluding relatives)

Name	Address	Phone Business	Year(s) Known	Number
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

D. EDUCATION

Languages - Please list:

Education	Name and Location	Years Attended	Subject(s) Studied	Highest level Completed
High School				
Jr. College / College / University				
Business/Trade School				
Other - explain				

E. SKILLS

Accounting Batch Plant Bookkeeping Carpentry
 Cement Finishing Cranes Crushers Data Processing
 Dispatching Driving (Truck) Electrical Engineering
 Grader Iron Work Laborer Loaders
 Management Mechanic Personal Computer Purchasing
 Quality Control Receptionist Sales Secretarial
 Vehicle Body Work Welding Word Processing Other

Have you received any safe driving awards? Yes No

If yes, from whom: _____

Have you had any specific job training? _____

F. EMPLOYMENT HISTORY (List present or most recent employer first)

Please provide complete and accurate, full-time and part-time employment record

NOTE TO THOSE APPLYING FOR A DRIVER POSITION:

Vehicle having GVWR of 26,001 lbs. or more, vehicles designed to transport 16 or more passengers (including the driver), or any size vehicle used to transport hazardous materials in the quantity requiring placarding.

NOTE: The **Federal Motor Carrier Safety Regulations (FMCSRs)** apply to anyone operating a motor vehicle on a highway or interstate commerce to transport passengers or property when the vehicle: (1) weighs or has a GVWR of 10,001 pounds or more, (2) is designed or used to transport more than 8 passengers (including the driver), OR (3) is of any size and is used to transport hazardous materials in a quantity requiring placarding.

1

Employer _____

Phone _____

Address _____

Position Title _____

Supervisor's Name and Title _____

Rate of pay _____

Date of Employment (Month/Year) From _____ To _____

Describe your responsibilities: _____

Explain your reason for leaving: _____

May we contact your employer? Yes No (explain)

Fill out the following only if applying for a Driving Position

Were you subject to the FMCSRs while employed Yes No

Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

2

Employer _____

Phone _____

Address _____

Position Title _____

Supervisor's Name and Title _____

Rate of pay _____

Date of Employment (Month/Year) From _____ To _____

Describe your responsibilities: _____

Explain your reason for leaving: _____

May we contact your employer? Yes No (explain)

Fill out the following only if applying for a Driving Position

Were you subject to the FMCSRs while employed Yes No

Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

3

Employer _____

Phone _____

Address _____

Position Title _____

Supervisor's Name and Title _____

Rate of pay _____

Date of Employment (Month/Year) From _____ To _____

Describe your responsibilities: _____

Explain your reason for leaving: _____

May we contact your employer? Yes No (explain)

Fill out the following only if applying for a Driving Position

Were you subject to the FMCSRs while employed Yes No

Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

4

Employer _____

Phone _____

Address _____

Position Title _____

Supervisor's Name and Title _____

Rate of pay _____

Date of Employment (Month/Year) From _____ To _____

Describe your responsibilities: _____

Explain your reason for leaving: _____

May we contact your employer? Yes No (explain)

Fill out the following only if applying for a Driving Position

Were you subject to the FMCSRs while employed Yes No

Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

Have you ever been discharged by an employer? Yes No

If yes, please explain all terminations: _____

List all periods in which you were unemployed: _____

How did you spend this time? _____

Do you have responsibilities, activities or commitments that may require time away from work? _____

If yes, please explain: _____

Would you be able to work overtime or weekends? _____

If necessary, would you be willing to relocate? _____

What type of work do you enjoy most? _____

What are your career goals for the future? _____

Occasionally, an application form makes it difficult for an applicant to adequately summarize their complete background. To assist us in finding the proper position for you in our company, use the space below to summarize any additional information necessary to describe your full qualifications (special training, skills, hobbies, volunteer work, experience, etc.).

I certify that I am not engaged in any outside activity or business that could be considered in conflict with the company's interest or those of its clients, nor will I become engaged in such activity or business if employed.

In the event of employment, I understand that false and misleading information given on my application or interview(s) may result in discharge. I also understand to abide by all rules and regulations of the company; as permitted by law.

Signature: _____ Date: _____

Applicant

IF APPLYING FOR A DRIVING POSITION, PLEASE COMPLETE.

List below the employers, other than those listed in your employment history, you have worked for as a COMMERCIAL DRIVER for the past 10 years (DOT Requirement)

From				
To				
From				
To				
From				
To				
From				
To				

G. DRIVING EXPERIENCE/QUALIFICATIONS

DATE OF BIRTH (Drivers only) _____

Fill out only if applying for a drivers position

Can you provide proof of age?

Yes No

Do you possess more than one driver's license?

Yes No

If yes, list state and expiration date _____

List all driver licenses or permits held in the past 3 years

State	License Number	Type	Exp. Date
DRIVER _____			

LICENSES _____

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 IS TO EITHER A OR B IS YES, EXPLAIN: _____

Do you possess a DOT certified physical card?

Yes No

Class of Equipment	Yes	No	Type of Equipment Van, Tank, Flat, Etc.	Dates		Approx. No. of Miles (Total)
				From	To	
Mixer Truck						
Straight Truck						
Tractor & Semi Trailer						
Tractor - 2 Trailer						
Tractor - 3 Trailers						
Other - explain						

ACCIDENT RECORD (Fill out if applying for a driving position)

For the past 3 years or more (attach sheet if more space is required). if none - write none

	Date	Nature of Accident	Fatalities	Injuries	Hazardous Material Spill
Last Accident					
Next Previous					
Next Previous					

TRAFFIC CONVICTIONS (Fill out if applying for a driving position)

Include traffic convictions and forfeitures for the past 3 years (other than parking violations). if none - write none (attach sheet if more space is required)

Location	Date	Charge	Penalty

List states operated in for the last five years: _____

Show any training, transportation or other experience that may help in your work for this company

List courses and training other than shown elsewhere in the application

List special equipment or technical materials you can work with (other than already shown)

PRE-EMPLOYMENT DRUG AND ALCOHOL AUTHORIZATION FORM

I, _____, understand the Company requires a pre-employment drug screen test, which is at the companies expense, and if offered a position, my employment would be contingent upon passing such test. After accepting a position, I will adhere to company's drug and alcohol policy.

Print Name _____ Date _____

Signature _____

AUTHORIZATION FOR RELEASE FORM

I authorize the company to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended). I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the company.

If applicable, I also understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted for the purpose of investigating my safety performance history as required by 49 CFR 391.23(d) and (e)

I understand that I have the right to:

- Review information provided by previous employers
- Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and
- Have rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on accuracy of the information

Signature _____ Date _____

Applicant

EMAIL TO: HR@cemstone.com

OUR COMMITMENT TO SAFETY

SAFETY MISSION

The personal health and safety of each employee is of primary importance. The prevention of occupationally induced injuries and illnesses is given precedence over operating productivity whenever necessary. In keeping with the highest standards, management will provide all reasonable mechanical and physical facilities required for personal health and safety. We will maintain and enforce a health and safety program conforming to industry best practices. This program requires cooperation in all health and safety matters between not only supervisor and employee, but also fellow employees. Only a cooperative effort can improve safety performance.

CRITICAL COMPONENTS OF OUR SAFETY PROGRAM

- Conducting a program of health and safety that includes inspections to identify and control unsafe working conditions or practices, control health hazards, and to comply with the health and safety requirements for every job.
- Training all employees in good health and safety practices, and conducting individual and group meetings to communicate safety issues.
- Providing necessary personal protective equipment and instructions for its use and care.
- Developing effective health and safety policies and requiring that employees understand and adhere to these rules as a condition of employment.
- Understanding that unsafe behavior, specifically the interaction between employees and equipment, is the root cause of most incidents.
- Conducting prompt and thorough investigations of every accident to determine the cause and correct the problem so that it will not occur again.
- Ensuring that safety is never compromised for our employees or customers and that all employees: operational, administrative or otherwise are held accountable to the same extent.
- Recognizing that all injuries, work related injuries and environmental incidents are preventable; and providing mechanical and physical safeguards to the maximum extent possible.
- Focusing on the safety program and unsafe behavior will result in a reduction of incidents with the ultimate goal being the elimination of all recordable injuries, illnesses and incidents.

MISSION STATEMENT

Our Mission **Every Day** is to be a **Trusted** Partner with **Passionate** People **Creating** Building Materials for a Better **Tomorrow**.

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amconconcreteproducts.com

BLUESTONE PRODUCTS
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cemstone.com

TCC MATERIALS
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