

Congratulations on taking the first step towards employment with Direct Traffic Control, Inc. Please feel free to take this application with you to complete.

When submitting your application, we will need a copy of the following items:

- **Driver's License**
- **Social Security Card**
- **CDIB Card (if applicable)**
- **Copy of your MVR (see your local tag agency)**

Prior to employment, you will also need to complete a substance abuse test and submit to random testing.

If you have any questions about required items, please contact the Human Resources department.

Thank you for applying for a position with Direct Traffic Control, Inc. and we look forward to receiving your completed application.



601 South 45th Street East
PO Box 602
Muskogee, OK 74402
Phone 918/682-1900
Fax 918/682-9993
DTCI@directtrafficcontrol.com

GENERAL INFORMATION

1. Prior to employment, the following steps will be performed:
 - a. All references with previous employers are reviewed.
 - b. Workers compensation claim history is reviewed
 - c. Motor vehicle record is reviewed
 - d. Criminal record is reviewed
 - e. Pre-employment drug test
2. In response to federal requirements, applicants may be required to furnish a pre-employment physical at their own expense.
3. In response to federal requirements, employees may be required to furnish certified proof of physical examinations yearly. The employee will be responsible for the expense of the physical.
4. **ALL NEW EMPLOYEES ARE HIRED FOR A NINETY (90) DAY INTRODUCTORY PERIOD.**



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 Muskogee, OK 74403
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APPLICATION FOR EMPLOYMENT

Please print clearly

Date: _____ DOB: _____ Social Security Number: _____

Name: _____
Last First MI

Present Address: _____
Street City State Zip

Previous Address: _____
Street City State Zip

Phone Number: _____ Are you 18 years old or older? Yes No

Position Desired: _____ Wages Desired: _____

How did you learn of this Position? _____

Have you ever been convicted of a felony? Yes No if yes, what charge? _____
(A conviction will not necessarily disqualify an applicant from employment)

Do you have any special skills, training or qualifications?

What date would you be available for work? _____ Are you willing to relocate?
 Yes No

EDUCATION

Type of School	Name and Location	Years attended	Did you Graduate?	Subjects Studied
High School				
College				
Trade or Business				
Other				

US Military Service Yes No Which Service? _____ Dates _____ to _____

(OVER)

An Equal Employment Opportunity Employer

WORK HISTORY

Have you ever been employed or applied with this company in the past? Yes No

Previous Employers Start with present or most recent employer.

=====

1.

From To Business Name Supervisor's Name

Type of Business Address Phone Number

Your Position Starting rate: Leaving rate

Describe your responsibilities:

Reason for leaving:

2.

From To Business Name Supervisor's Name

Type of Business Address Phone Number

Your Position Starting rate: Leaving rate

Describe your responsibilities:

Reason for leaving:

3.

From To Business Name Supervisor's Name

Type of Business Address Phone Number

Your Position Starting rate: Leaving rate

Describe your responsibilities:

Reason for leaving:

May we contact your previous employers? Yes No

"I certify that all the information submitted on the application is true and complete. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed, upon discovery, my employment may be terminated. In consideration of my employment, I agree to conform to the Company's rules and regulations. I understand that Oklahoma is an "employment at will" state and my employment and compensation can be terminated, with or without cause, and with or without notice, at any time by the Company.

Date: _____

Signature: _____



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Affirmative Action Information

Last Name: _____ First Name: _____ MI: _____
Birth Date: _____ Social Security #: _____
Gender: _____ Marital Status: _____
Location: _____ Position applying for: _____

EEO Job Category:

___ Officials & Managers ___ Professional ___ Technician ___ Sales Force ___ Operatives
___ Office & Clerical ___ Craft Worker ___ Laborers ___ Service Workers

I am a member of the following Race/Ethnic group: (mark one)

A. Race

___ American Indian/Alaskan Native (card # _____)
___ Asian/Pacific Islander
___ Black
___ White

B. Ethnic Group

___ Hispanic Origin
___ Not of Hispanic Origin

Are you a Vietnam Veteran: Yes ___ NO ___

(180 days of continuous active duty between 08/05/64 to 05/07/75)

Confidential

This data will aid in keeping records required of us by the Federal and State Laws to which we are subject.
It is confidential and will remain separate from other personnel records.

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Fax (918) 682-9993
DTCI@directtrafficcontrol.com

Direct Traffic Control, Inc. Will Obtain a Background Check

You acknowledge and understand that in connection with your application for employment with Direct Traffic Control, Inc. (including any independent contract for services) or when deciding whether to modify or continue your ongoing employment, if hired, we may obtain a “consumer report” and/or an “investigative consumer report” on you from Trak-1, a consumer reporting agency, or from any third party, in strict compliance with both state and federal law.

Consumer Report Defined

A consumer report is any communication of information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used for purposes of serving as a factor in establishing your current and/or continuing eligibility for employment purposes. A common term for a consumer report is a “background check report.”

Investigative Consumer Report Defined

An investigative consumer report is obtained through personal interviews with individuals who may have knowledge of your character, general reputation, personal characteristics, or mode of living. An investigative consumer report might include, for example, calls to the personal references you provide or conversations with former supervisors or colleagues where you worked.

Reports May Contain

The consumer reports or investigative consumer reports may contain public record information which may be requested or made on you including, but not limited to: consumer credit, criminal records, civil cases in which you have been involved, driving history records, current motor vehicle insurance coverage information, education records, previous employment history, workers compensation claims history, social security traces, military records, professional licensure records, eviction records, drug testing, government records, and others.

You further understand that these reports may include experience information along with reasons for termination of past employment. You also acknowledge and understand that information from various federal, state, local and other agencies which contain information about your past activities will be requested, and that a consumer report containing injury and illness, drug testing, or other medical records and medical information may be obtained only after a tentative offer of employment has been made.

Your Rights as a Consumer

You are hereby notified that you have the right to make a timely request for a copy of the scope and nature of the above investigative background report and/or a complete copy of your consumer report contained in Trak-1's files on you at the time of your request by providing proper identification.

You are further notified that, prior to being denied employment based in whole or in part on information obtained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the consumer reporting agency and a description in writing of your rights under the Fair Credit Reporting Act. Correspondence to Trak-1 should be forwarded to:

Trak-1 | Consumer Relations | 7131 Riverside Parkway | Tulsa, Oklahoma 74136

800-600-8999 | CustomerCare@trak-1.com

Certified DBE Oklahoma ▪ Arkansas ▪ Kansas TERO Certified

AUTHORIZATION TO OBTAIN CONSUMER REPORT

The following is information required in order for Direct Traffic Control, Inc. to obtain a complete consumer report:

Full Legal Name : _____
(First Name, Full Middle Name, Last Name)

Street Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Gender*: M / F Race*: _____

Social Security Number: _____ Date of Birth*: _____

Driver's License Number: _____ Issuing State: _____ Expiration Date: _____

Other or Former Names: (AKA, Maiden Names, Married Names, Surnames, Etc.) _____

Your signature below indicates the following:

- 1) You authorize, without reservation, Trak-1 or any third party to obtain and/or furnish to Direct Traffic Control, Inc. any records or information referenced in the provided disclosure statement for employment related purposes;
- 2) You authorize Direct Traffic Control, Inc. ongoing procurement of any records or information, reports and records at any time during your employment to the extent allowed by law;
- 3) You authorize the use of a fax or photocopy of this authorization as having the same authority as the original;
- 4) You authorize and request, without reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agency, or other entity, person or agency having knowledge about you to furnish Direct Traffic Control, Inc. and/or Trak-1 with any and all background information in their possession regarding you for these stated employment purposes;
- 5) You understand and agree that in connection with your employment your consumer report information, whether investigative or otherwise, may be shared with and/or reviewed by all applicable parties involved in the hiring process;
- 6) You have read and fully understand the foregoing disclosure and this authorization.
- 7) You certify that all the information you have provided on this form is true, complete, correct and accurate; and
- 8) You certify you have received, reviewed and understand the "Summary of Your Rights under the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.)" which is published by the Federal Trade Commission to help you know your rights.

Customer Signature: _____ Date: _____

* This information will be used for background screening purposes only.

Check this box if you are a Minnesota, Oklahoma, or California applicant, and you would like to receive a copy of your consumer report, if one is obtained. For **California** applicants only: a copy of your report will be sent to you by the above-referenced employer within three business days beginning on the date of receipt by the employer. For **Minnesota** applicants only: the consumer reporting agency shall furnish a copy of your consumer report within twenty-four hours of providing it to the above-referenced employer. For **Oklahoma** applicants only: the consumer reporting agency shall furnish a copy of your consumer report.

CALIFORNIA APPLICANTS: Pursuant to § 1786.22 of the California Civil Code, you may view the file maintained on you by Trak-1 during normal business hours. You may also obtain a copy of this file, either in person or by mail, by submitting proper identification and paying the costs of duplication services. You may also receive a summary of the file by telephone upon production of adequate identification. Trak-1 is required to have trained personnel available to explain your file to you and any coded information contained therein. You may appear in person alone, or with another person of your choice, provided that this additional person furnishes proper identification.

California Civil Code section 1786.16(2) requires a separate disclosure and authorization to be signed by an applicant or current employee each time a background check is performed for employment purposes. This requirement does not apply in situations where the employer has a suspicion of wrongdoing or misconduct by a current employee.

MAINE APPLICANTS: Pursuant to Maine state law, § 1317(2), Trak-1 is required to reinvestigate any consumer dispute made by a consumer residing in the state of Maine within 21 calendar days of notification of the dispute by the consumer