# **Application for Employment**



An Equal Opportunity Employer M/F

We appreciate your interest in Casella Waste Systems, Inc., and its affiliates and assure you that we are sincerely interested in your qualifications.

#### **Notice Regarding Background Investigation**

Casella reserves the right to investigate the information you have provided to us, and other relevant background information in connection with your application for employment to determine whether you are a suitable candidate. The law requires us to provide you with notice and information about these background checks. In processing your application for employment, Casella may verify all of the information provided by you including your prior employment, education, character, general reputation, and criminal record, which may include personal interviews. In addition, we may verify your driving record, if deemed necessary, as determined by Casella. This authorization and release is valid for future screenings for retention, promotion or re-assignment, unless revoked in writing. Should you decline to authorize a background investigation, your employment application will be deemed withdrawn.

#### A Note To Applicants:

In compliance with the Immigration and Control Act of 1986, should you be employed by CWS, you will be required to provide approved original documentation that establishes your identity and verifies your right to work in the United States. You will be required to complete a Form I-9 on or before your first day of employment.

Casella is committed to maintaining a smoke-free, alcohol-free, and drug-free workplace. The Company reserves the right to request drug and/or alcohol tests and screenings to applicants and employees to the extent permitted by law. Any offer of employment may be conditioned upon the successful completion of such screenings, and Casella employees may be required to submit to an alcohol and/or drug screening at any time during their employment at the discretion of the Company pursuant to Company policy and applicable law.

Applicant further understands that should he/she be employed by Casella Waste Systems, Applicant will be required to accept and agree to the policies, terms and conditions, and practices set forth in Company's Employee Handbook, which will be provided to Applicant upon employment. Further, and as a condition of employment, Applicant will be required to acknowledge the Handbook's receipt, and assent to compliance with its contents. While such Handbook's contents may from time to time be modified, and the Handbook covers varying conditions of employment, and ongoing employment, Applicant is hereby advised, and understands, that the Handbook will at a minimum, require employees to maintain and protect the confidentiality of all proprietary and confidential information regarding Company, its employees and business operations and plans, both during and after employment with Company; and, to not compete with Company for a reasonable time following employment, or to solicit employees or customers for that purpose; and, that Applicant will disclose to Company during Applicant's employment, in writing, all Inventions and copyrightable Works, which are conceived, made, discovered, written or created by Applicant alone, and/or in combination with others, during Applicant's employment, and that Applicant will assign all rights and title to such Inventions or Works to Company."

Please read this application and your answers carefully and completely before signing.

▼ NAME: first / middle initial / last	
▼ STREET ADDRESS	
▼ CITY	▼ STATE ▼ ZIP/POSTAL CODE
▼ EMAIL	
▼ HOME PHONE NUMBER	▼ CELL PHONE NUMBER
▼ SOCIAL SECURITY NUMBER	

#### **Applicant Release, Acknowledgement, And Authorization**

I acknowledge that I have a copy of the NOTICE REGARDING BACKGROUND INVESTIGATION and that I have read and understood that notice.

I hereby give my consent and authorize Casella to conduct an investigation of my personal and employment history, including obtaining information from my previous employers, schools, and references. I release all persons, schools, and employers of any and all claims and liability for providing such information, and release the Company from liability with respect to such inquiries. I understand and agree that Casella's inquiry, if made, may include a request for information about my past employment, education, character, general reputation, and criminal record, and may include personal interviews.

I hereby give the Company permission to obtain such information as described above to be used for employment purposes at any time during the application process and, if I am hired, throughout the tenure of employment.

▼ APPLICANT SIGNATURE	▼ DATE: mm / dd / yy
▼ REFERRED BY	
▼ POSTION APPLYING FOR	Temporary Part-Time Full-Time
Are you able to work overtime?	yes no
Are you under 18 years of age?	yes no
Are you legally eligible to work in the United States?	yes no
Are you able to perform the essential duties of the job for which you are applying with or without reasonable accommodation?	yes no
Rate of pay expected:	
Have you worked for the Company, under your current or any other name, before?	yes no
▼ WHERE	▼ REASONS FOR LEAVING:
▼ POSITION	
▼ DATE FROM: mm / dd / yy	
▼ NAMES OF ANY RELATIVES EMPLOYED BY THE COMPANY: first / last	

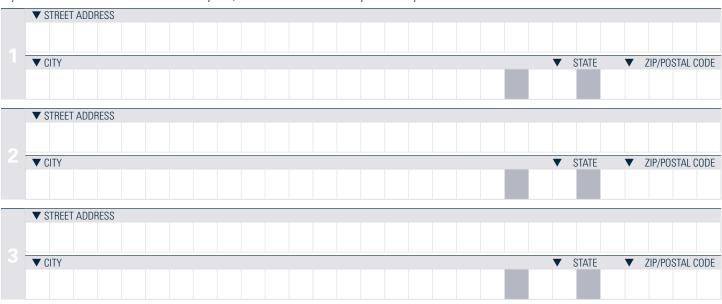
▼ ARE YOU CURRENTLY EMPLOYED?	▼ IF SO, FOR HOW LONG?									
yes no										
	▼ IF NOT, ON WHAT DATE DID YOUR LAST EMPLOYMENT END?									

### Former employers

cle, over the last 10 years. If more space is no		all employers, for whom they drove a commercial motor ded in the application.
▼ NAME OF COMPANY		
▼ SUPERVISOR'S NAME: first / last		
▼ POSITION HELD		
▼ DATE FROM: mm / dd / yy	▼ DATE TO: mm / dd / yy	▼ REASONS FOR LEAVING:
▼ PHONE	▼ MAY WE CONTACT:	_
	yes no	
▼ NAME OF COMPANY		
▼ SUPERVISOR'S NAME: first / last		
▼ POSITION HELD		
▼ DATE FROM: mm / dd / yy	▼ DATE TO: mm / dd / yy	▼ REASONS FOR LEAVING:
▼ PHONE	▼ MAY WE CONTACT:	
	yes no	
▼ NAME OF COMPANY		
▼ SUPERVISOR'S NAME: first / last		
▼ POSITION HELD		
▼ DATE FROM: mm / dd / yy	▼ DATE TO: mm / dd / yy	▼ REASONS FOR LEAVING:
▼ PHONE	▼ MAY WE CONTACT:	
	yes no	

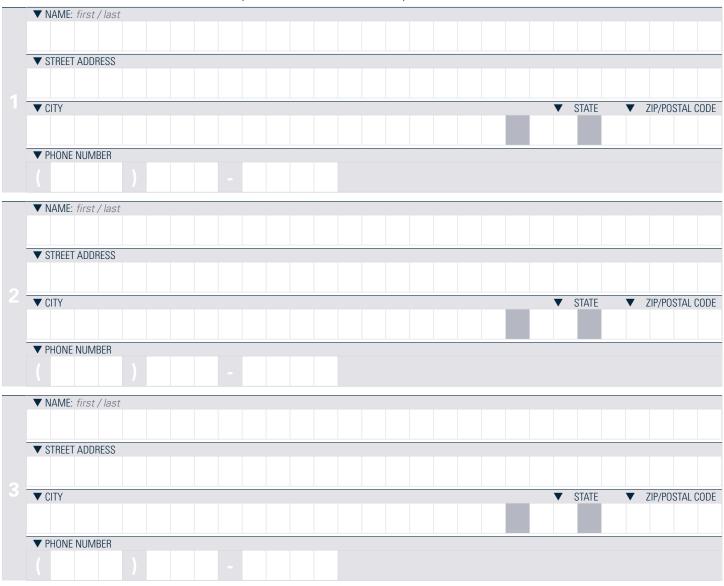
#### **Additional Residences**

If your current residence is less than three years, list all residences for the past three years.



#### References

Please list three references that can comment on your work who are not related to you



#### **Education**

▼ THE HIGHEST GRADE COMPLETED	▼ COLLEGE											
1 2 3 4 5 6 7 8 9 10 11 12												
▼ LAST SCHOOL ATTENDED												
▼ DEGREES, CERTIFICATES, DIPLOMAS, GED, LICENSES, ETC. OBTAINED												

My signature below certifies that this application was completed by me, and that I have read, understand, and agree to the terms of **THE ENTIRE** application.

▼ SIGNATURE	▼ DATE: mm / dd / yy

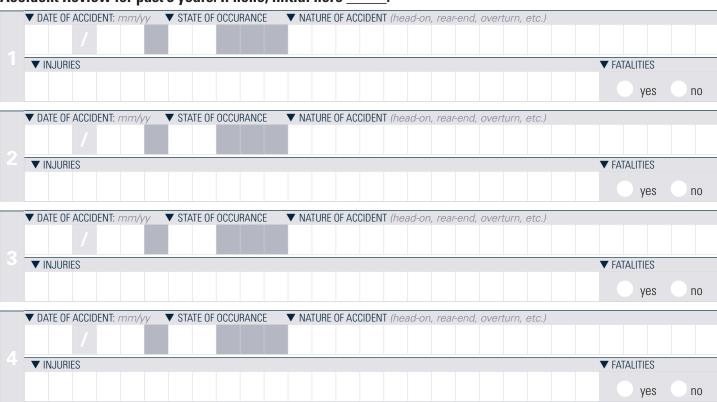
Additional Space
Please include information you could not fit above (i.e. previous employment, addresses, license numbers, explanations):

# **Driver Experience and Qualification** ▼ NAME: first / middle initial / last ▼ SIGNATURE ▼ DATE: mm / dd / yy The U.S. Department of Transportation requires that drivers state their date of birth. (391.21 (b)(2)) ▼ DATE OF BIRTH: mm / dd / yy ▼ SOCIAL SECURITY NUMBER Drivers licenses held in past 3 years must be shown ▼ STATE ▼ LICENSE NUMBER ▼ ENDORSEMENT(S) ▼ EXPIRATION DATE ▼ CLASS In which states have you operated during the last five years? ▼ STATES List special driver courses/training and awards ▼ DRIVER COURSES OR DRIVER TRAINING ▼ DRIVER AWARDS ▼ IF YOU ANSWERED"YES", PLEASE GIVE DETAILS Have you ever been denied a license, permit, or privilege to operate a motor vehicle? yes no Has any license, permit, or privilege ever been suspended or revoked? yes no Have you ever been disqualified for violations of Federal Motor Carrier Safety Regulations? yes no

#### **Driving Experience**

•	▼ TYF	PE OF E	QUIPN	IENT (	van, t	ank,	flat,	Etc)	▼ CL	ASS	▼ DATES F	ROM/T0: r	mm/yy			▼ AN	NUAL	TOTAL	MILES	

#### Accident Review for past 3 years. If none, initial here \_\_\_\_\_.



#### Traffic convictions for past 3 years other than parking violations. If none, initial here \_\_\_\_\_.

▼ DATE OF CC	ONVICTION	: mm/yy	▼ STAT	E OF OCC	URANC	E '	▼ COI	NVICT	ED OF								

My signature below certifies that this application was completed by me, and that I have read, understand, and agree to the terms of the entire application.

▼ SIGNATURE	▼ DATE: mm / dd / yy

## **Maintenance Experience and Qualifications**

▼ NAME:	first / middle initia	l / last									
▼ COURSE	S AND TRAINING IN I	MAINTENANCE									
3											

#### **Job Function**

▼ AREA	▼ FORMAL TRAINING	▼ YEARS EXPERIENCE	▼ AREA	▼ FORMAL TRAINING	▼ YEARS EXPERIENCE
Drive Line Components	yes no		Inspections	yes no	
Diesel Engine Tune-Up and Rebuild	yes no		Electical Repair	yes no	
Tire Service	yes no		Brakes	yes no	
Trailer Repair	yes no		Cooling Systems	yes no	
Compaction Equipment Installation and Repair (compactors, balers, conveyors)	yes no		Hydraulic Systems Troubleshooting and Repair (pumps, pto's, valves)	yes no	
Waste Industry Body Troubleshooting and Repair	yes no		Heavy Equipment Repair (yellow iron)	yes no	
Air Conditioning	yes no				

#### **Shop Equipment**

▼ AREA	▼ FORMAL TRAINING	▼ YEARS EXPERIENCE	▼ AREA	▼ FORMAL TRAINING ▼	YEARS EXPERIENCE
Electrical Diagnostic Equipment	t yes no		Hydraulic Hose machine	yes no	
Tire Servicing Machine	yes no		Engine Rebuilding	yes no	
Emission's testing Equipment	yes no		Multirange volt, amp, and ohm meter	yes no	
Jacks, Jack stands, Lifts, Props	yes no		Diesel Injection Equipment	yes no	
Sheet Metal Equip.	yes no		Magnetic Crack Detector	yes no	
Shop Press	yes no		Electric Welder	yes no	
Diagnostic computer software heavy diesel vehicles (engine, transmission, brake)	yes no		Oxy/Acetylene cutting torch	yes no	
Paint Spray Gun	yes no		Smoke Measuring Equipment	t yes no	
Inspections	yes no		Air Conditioning	yes no	
Noise Measuring Equipment	yes no			yes no	

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▼ SIGNATURE	▼ DATE: mm / dd / yy

#### **Invitation to Identify for Affirmative Action Purposes**

Casella Waste Systems, Inc., ("Casella") is an equal opportunity, affirmative action employer and supports workforce diversity. Casella does not discriminate against any person on the basis of race, color, religious creed, sex, national origin, age, place of birth, ancestry, genetic information, marital or veteran status, sexual orientation, a physical or mental impairment that limits a major life activity, or any other non-merit factor in employment. All Casella policies, practices, and procedures comply with federal and state regulations, including Section 503 and 504 of the Rehabilitation Act of 1973.

Completion of this form is STRICTLY VOLUNTARY — you are asked to provide this information to help Casella Companies and its affiliates meet its commitment to these efforts and fulfill reporting requirements. This form is kept separate from the employment application. This information is used in accordance with the Casella's affirmative action plan and applicable federal and state laws. Your eligibility for employment is not affected by failure to complete this form.

▼ NAME: first / middle initial / last	
TO WILL. MOET THINGING WHENTY IDEE	
▼ POSTION APPLYING FOR	
	Temporary Part-Time Full-Time
▼ DATE APPLYING FOR: mm / dd / yy	▼ GENDER: male / female

#### **Ethnic Category**

	• •				
	American Indian or Alaskan Native				
	A person having origins in any of the original people of North  America and who maintains cultural identification through tribal  ▼ NAME OF ENROLLED OR PRINCIPAL TRIBAL AFFILIATION:				
	affiliation or community recognition.				
	Asian Or Pacific Islander				
	All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Pacific Islands. This includes, for example, China, Japan, Korea, and Philippine Islands, and Samoa. Also, this origin includes persons from the Indian subcontinent, as well as all persons with national origins from Bangladesh, Bhutan, India, Nepal, Pakistan, Sikkim, and Sri Lanka.				
	Black Or African-American (not of Hispanic origin)				
	A person having origins in any of the Black racial groups of Africa.				
	Hispanic				
	All persons of Mexican, Puerto Rican, Cuban, Central or South America, or other Spanish culture regardless of race.				
	White (not of Hispanic origin)				
	All persons having origins in any of the peoples or Europe, North Africa, or the Middle East.				
	Two or more races				

My signature below certifies that this application was completed by me, and that I have read, understand, and agree to the terms of the entire application.

▼ SIGNATURE	▼ DATE: mm / dd / yy