

APPLICATION OF EMPLOYMENT

Required Addendum to All Commercial Driver Applications ONLY

Driving Experience (attach additional sheets if necessary)							
Class of Equipment	Type of Equipment (Van, Tank, Flat, etc.)	Dates From To	Approximate No. of Miles (Total)	Nature of Operation (Type of Position and Purpose of Operation)			
Motorcoach, School Bus							
Tractor, Semi, Doubles							
Straight Truck, No Trailer							
Other (Describe)							

List states operated in, for the last five (5) years:

List special courses/training completed (PTD/DDC, HAZMAT, ETC):

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Motor Vehicle Accident History Within the Past 3 Years (attach additional sheets if necessary)						
Date	Nature of Accident (Head-on, Rear-End, Upset, etc. and Severity of Injuries)	No. of Fatalities	No. of Injuries			

Traffic Violations of Which You Were Convicted or Forfeited Bond Within the Past 3 Years (attach additional sheets if necessary)							
Date	State	Violation (other than violations involving only parking)	Brief Description of Relevant Facts(Explanation of what caused the accident)	Penalty (forfeited bond, collateral, points)			

Have you ever been denied a license, permit or privilege to operate a motor vehicle? _____Yes _____No

If you answered no, please write the following certification below "I attest that I have never been denied a license, permit or privilege to operate a motor vehicle

If you answered yes, please explain the details and circumstances of such denial.

Is there any reason you might be unable to perform the functions of the job for which you have applied (as described in the job description)

_____Yes _____No

If you answered yes, please explain why you might be unable to perform the functions of the job for which you applied

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Controlled Substance & Alcohol Questionnaire For DOT Purposes Only (pursuant to 49 CFR § 40.25(j))					
During the past two years have you applied for or been employed in a safety-sensitive transportation position covered by any DOT agency drug and alcohol testing rules?	□ Yes	🗆 No			
IF YES, have you ever tested positive or refused to test, on any pre-employment drug or alcohol test administered by an employer during that period?	□ Yes	□ No			
IF YES, did you successfully complete the return-to-duty process?	□ Yes	□ No			
IF YES, can you provide documentation indicating successful completion of the process?	□ Yes	□ No			

Pre-Employment Inquiry Concerning Performance of a Safety Sensitive Function

The ability to perform the job duties of Commercial Driver requires the ability to perform safety sensitive functions. Regardless of how you answer the above questions, Noonan Energy Corporation must comply with federal regulations to verify the truthfulness of these statements. Specifically, the Federal Motor Carrier Safety Administration requires Noonan Energy Corporation to conduct a query of the Clearinghouse to obtain information about whether the driver has a verified positive, adulterated, or substituted controlled substances test result; has an alcohol confirmation test with a concentration of 0.04 or higher; has refused to submit to a test in violation of §382.211; or that an employer has reported actual knowledge, as defined at §382.107, that the driver used alcohol on duty in violation of §382.205, used alcohol before duty in violation of §382.207, used alcohol following an accident in violation of §382.209, or used a controlled substance, in violation of §382.213.

By submitting this application, you agree to sign a specific consent form authorizing Noonan Energy Corporation to obtain this information from the Clearinghouse. Failure to do so will make you ineligible to work as a Commercial Driver and an offer of employment will be revoked. There are no exceptions to this policy.

Additional Disclosures

The information you provide in regarding your current or previous employers will be used, and your current or previous employers will be contacted, for the purpose of investigating your safety performance history information as required by Federal Motor Carrier Safety Act regulations. As a prospective driver employee, you have the following rights regarding the information provided to Noonan Energy Corporation by your current or previous employers:

- The right to review information provided by previous employers;
- The right to have errors in the information corrected by the previous employer and for that previous employer to resend the corrected information to Noonan Energy Corporation;
- The right to have a rebuttal statement attached to the alleged erroneous information, if you and your previous employer cannot agree on the accuracy of the information.

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ACKNOWLEDGEMENT AND AUTHORIZATION

- Please read all the information in this section and then sign in the indicated area. This will allow Noonan Energy Corporation to accept and retain this application.
- Section 383.21 of the Federal Motor Carrier Safety Administration Regulations (49 CFR § 383.21) states "No person who operates a commercial motor vehicle shall at any time have more than one driver's license." I certify that I do not have more than one motor vehicle license.
- If I am extended a conditional offer of employment, I agree to take a physical examination, including tests to determine drug or alcohol use, when required by Noonan Energy Corporation, at no personal expense and I further agree that the examining physician may disclose to Noonan Energy Corporation or its representatives the results of such examination.
- I acknowledge that any offer of employment is conditional on a satisfactory review of the Clearinghouse about information of my history with controlled substances and alcohol and that I must provide the necessary specific consent documentation with respect to providing such information for the review of Noonan Energy Corporation.
- This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature

Date

Printed Name

