



AlbuquerqueJournal

### Hiring Process Requirements

We want to thank you for taking interest in employment here at Highway Supply! We are always seeking career-minded individuals who care about employment longevity, advancement opportunities, and great benefits. Our hiring process is tougher than most. Please read the following below:

At Highway Supply, we have a set of Values that we live every day. We look to hire persons who share the same set of Values.

Highway Supply Values:

- **Respect**
- **Pride**
- **Honesty**
- **Creativity**
- **Teamwork**
- **Dependability**
- **Quality**
- **Fun**
- **Work/Life Balance**
- **Safety**
- **Timeliness**

#### Basic Requirements:

- You must fill out the standard employment application completely.
- You will need to have a thorough understanding of the position and job requirements in which you are applying for.
- You will need to provide at least 3 previous employment references.
- You must possess a valid New Mexico driver’s license. Our insurance company will verify that your motor vehicle driving record is acceptable. You must have an acceptable driving record – No more than 2 driving citations within the last 3 years and no DUI/DWI convictions within the last 5 years.
- You must be able to pass a pre-employment drug and alcohol test.
- We will conduct a background check
- If you can successfully meet these basic requirements and are selected for an interview, then you will start the interview process.

#### Interview Process:

- You will need to be prepared to have a minimum of 2 separate interviews and in some cases 3.
- We will contact all of your previous employment references.
- Once the interview process is completed and we have made you a job offer, then you will start the hiring process.

#### Hiring Process:

- You will be required to fill out a basic medical questionnaire that will identify your physical ability to perform the job which you are being hired for.
- A background check will be run.
- After a completed background check has been reviewed and approved, you will be required to take and pass a pre-employment drug screen. You are responsible for the \$70.00 drug screen fee up front. Should you pass the pre-employment drug screen, Highway Supply will reimburse you this cost. Positive results/failed tests will not be reimbursed and will be cause for withdrawal of employment offer. Please note that during the course of employment, you may be subject to random drug and alcohol testing.
- Highway Supply utilizes E-Verify to confirm employment authorization of all newly hired employees. This process requires you to bring at least two forms of ID on your first day of employment (e.g.: Driver’s License and Social Security Card, Driver’s License and Birth Certificate, etc. For a full list of acceptable documents, visit: <https://www.uscis.gov/i-9-central/acceptable-documents>).

I have read and understand the requirements stated above. I agree that by using an e-signature, I am applying my electronic signature, which is the legally binding equivalent to my handwritten signature. Whenever I execute an electronic signature on this application, it has the same validity and meaning as my handwritten signature. I also agree that no certification authority or other third-party verification is necessary to validate my e-signature.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



**Application for  
Employment**

**HIGHWAY SUPPLY, LLC**  
 6221 Chappell Rd NE  
 Albuquerque, NM 87113  
 505-345-8295, fax 505-345-0546

An Affirmative Action/Equal Opportunity Employer

**Instructions:** PLEASE PRINT OR TYPE. Fill out completely. Applications remain on file for 1 year.

**Personal Information**

|  |  |            |  |                             |  |
|--|--|------------|--|-----------------------------|--|
| Last Name  |  | First Name |  | Middle Name (If Applicable) | Social Security Number   |
| Permanent Address - Street   |  | City       | State  | Zip                         | Telephone Daytime and Evening (Area Code & No.)<br>(Day) (Evening) |
| Email Address:   |  |            | Best Way to Contact:   |                             |  |
| Are you legally eligible to work in the U.S.?<br>(Verification required upon hire) |  |            | Were you previously employed by Highway Supply, LLC?                                       |                             |  |
|  |  |            | Do you have any relatives currently employed by Highway Supply, LLC?<br>If yes, who: _____ |                             |  |

**Position(s) Applied for:** (Specific position applied for must be stated, or application will not be considered)

|   |     |                          |
|---|-----|--------------------------|
| 1.)   | 2.) | Date available to start: |
| How Did you hear about this job:  |     |                          |
| Please enter the Name of the Employee/Agency/Website that referred you: |     |                          |

**General Education**

| Type:               | School Name, City and State: | Number of Years Completed: | Degree(s) Earned/Expected: | Major(s)/Course(s) of Study: |
|---------------------|------------------------------|----------------------------|----------------------------|------------------------------|
| High School         |                              |                            |                            |                              |
| College/ University |                              |                            |                            |                              |
| Trade/ Business     |                              |                            |                            |                              |
| Other               |                              |                            |                            |                              |

**Professional Registration, Certification, or Licenses**

| Current License: | State: | License No.: | Year Licensed: | Expiration Date: |
|------------------|--------|--------------|----------------|------------------|
|                  |        |              |                |                  |
|                  |        |              |                |                  |

# Work Experience

## 1. Present or Most Recent Employer:

|                        |                  |  |                                |
|------------------------|------------------|--|--------------------------------|
| Company Name:          |                  | Address and Phone Number (Street, City, State, Zip): |                                |
| Starting Date:         | Starting Salary: | Starting Position:                                   | Starting Supervisor and Title: |
| Termination Date:      | Ending Salary:   | Ending Position:                                     | Ending Supervisor and Title:   |
| Reason for Leaving:    |                  |  |                                |
| Description of Duties: |                  |  |                                |

## 2. Previous Employer:

|                        |                  |  |                                |
|------------------------|------------------|--|--------------------------------|
| Company Name:          |                  | Address and Phone Number (Street, City, State, Zip): |                                |
| Starting Date:         | Starting Salary: | Starting Position:                                   | Starting Supervisor and Title: |
| Termination Date:      | Ending Salary:   | Ending Position:                                     | Ending Supervisor and Title:   |
| Reason for Leaving:    |                  |  |                                |
| Description of Duties: |                  |  |                                |

## 3. Previous Employer:

|                        |                  |  |                                |
|------------------------|------------------|--|--------------------------------|
| Company Name:          |                  | Address and Phone Number (Street, City, State, Zip): |                                |
| Starting Date:         | Starting Salary: | Starting Position:                                   | Starting Supervisor and Title: |
| Termination Date:      | Ending Salary:   | Ending Position:                                     | Ending Supervisor and Title:   |
| Reason for Leaving:    |                  |  |                                |
| Description of Duties: |                  |  |                                |

## 4. Previous Employer:

|                        |                  |  |                                |
|------------------------|------------------|--|--------------------------------|
| Company Name:          |                  | Address and Phone Number (Street, City, State, Zip): |                                |
| Starting Date:         | Starting Salary: | Starting Position:                                   | Starting Supervisor and Title: |
| Termination Date:      | Ending Salary:   | Ending Position:                                     | Ending Supervisor and Title:   |
| Reason for Leaving:    |                  |  |                                |
| Description of Duties: |                  |  |                                |

### READ CAREFULLY BEFORE SIGNING:

I certify that the answers given and statements made by me on this application or resume submitted are true and accurate to the best of my knowledge and belief. I understand that any misleading or false statements, and any omissions or alterations to the working of this application made by me may render this application void, and if I am employed, would lead to termination. I understand that Highway Supply, LLC. is committed to providing a drug free work environment for its employees. I consent to a drug test as a condition of employment or continued employment. I understand that I may not work in a position if it is determined that I pose a "direct threat" to the health or safety of myself or others. I further understand that if I am employed, no oral representations and/or promises will supersede written policies. This Application for Employment does not constitute a contract for employment. My employment may be terminated at any time, by either myself or Highway Supply, LLC, with or without cause or reason, and with or without notice.

### CONSENT FOR RELEASE OF INFORMATION:

In connection with this application or resume for employment, I authorize you to obtain information about my employment from my current and any former employers and I consent that they furnish you with any information about my employment, including impressions and opinions about my work, and reasons for my termination. If I am employed by you and thereafter seek employment elsewhere, I consent to your furnishing prospective employers with information about my employment, including opinions and impressions about my work, and reasons for my termination. I hereby release and discharge you and my current and any former employers from all claims or actions for loss, liability, damage, or expense which I now have, or which may hereafter arise from the making of inquiries about me, or furnishing of any information about me in connection with my application for employment. A photocopy of this authorization shall be considered as valid as the original.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Motor Vehicle Record Disclosure and Release

In connection with my ongoing employment or my application for employment, should I have or secure a position with Highway Supply, LLC, I understand that a motor vehicle record, which contains public record information, may be requested. I further understand that such report(s) will contain personal information and public record information concerning my driving record from federal, state, and other agencies that maintain such records, as well as independent services that provide driving record information.

**I authorize, without reservation, any party or agency contacted to furnish the above-mentioned information to Highway Supply, LLC or its agent.**

I hereby authorize procurement of my motor vehicle report. If hired, this authorization shall remain on file and shall serve as ongoing authorization for you to procure such reports at any time during my employment. **Highway Supply, LLC commercial auto insurer and agent will also use this information in conjunction with loss control and safety review efforts.**

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**Full Legal Name (Include Middle Initial) – Please Print**

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**Driver's License Number**

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**Date of Birth**

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**State Issued**

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**Signature**

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**Date**

\*\*I agree that by using an e-signature, I am applying my electronic signature, which is the legally binding equivalent to my handwritten signature. Whenever I execute an electronic signature, it has the same validity and meaning as my handwritten signature. I also agree that no certification authority or other third-party verification is necessary to validate my e-signature.