



Dear Applicant,

We are excited you are interested in joining our team.

To insure the application process goes smoothly and efficient, please complete the attached employment application in full. Upon completion, please return your application by one of the following methods:

Fax: 512-670-9800 Attn: Human Resources

Mail: 2001 Piccadilly Dr, Round Rock, Tx 78664 Attn: Human Resources

Online: www.laurenconcrete.com

If the requested information is not attached, review of your application could be delayed.

Qualified applicants will be contacted for an interview upon an opening within our company and must pass a pre-employment drug screen if offered a position within Lauren Concrete.

If you have any questions about Lauren Concrete or your application, please feel free to contact us at 512-389-2113 option 8.

Thank you for applying with us.

Sincerely,
Human Resources

APPLICATION FOR EMPLOYMENT



Lauren Concrete, LP is an equal opportunity employer. The Company's policy is not to discriminate against any applicant or employee based on race, color, sex, age, disability, religion, national origin, military or veteran status, or any other basis protected by applicable law.

Please provide all requested information. Incomplete or illegible applications will not be accepted.

A. APPLICANT INFORMATION

DATE: _____

Legal Last Name: _____ First: _____ M.I. _____

Other Names Used: _____

Mailing Address: _____ Apartment/Unit No.: _____

City: _____ State: _____ Zip: _____ County: _____

Phone (Home): _____ Phone (Cell): _____

E-mail Address: _____ Social Security No.: _____

Driver's License No: _____

Expiration Date: _____ State Issued: _____ Driver's License Class: _____

How did you hear about us? Walk-in Advertisement Friend Relative Internet Other
(name) (name) (name) (name)

Position Applying for: _____ Date Available: _____ Desired Salary: \$ _____

Availability: Full-Time Part-Time Temporary Seasonal Educational Co-op

Are you under any type of agreement that would prevent you from performing the job for which you are applying or which you are being considered, such as a non-competition, non-disclosure, or non-solicitation agreement? Yes No

Is there any *other* reason you are unable to perform the duties of the job for which you are applying? Yes No

Can you travel if the job requires it? Yes No

Have you ever been employed by or applied for a position with our company? Yes No If so, when? _____ Position: _____

List the names of any friends and/or relatives now or previously employed by **Lauren Concrete**:

Name/Position: _____

Name/Position: _____

Do you have a legal right to work in the United States? Yes No

Did you serve in the U.S. Armed Forces? Yes No Branch: _____ Discharge Date: _____

B. EDUCATION -

Please list the highest level of education completed and any education you are currently pursuing (high school, college, trade/tech school):

Institution _____ City/State: _____ Phone: _____

From _____ to _____ Did you graduate? Yes No Degree: _____

Institution _____ City/State: _____ Phone: _____

From _____ to _____ Did you graduate? Yes No Degree: _____

Summarize any training, skills, licenses and/or certificates that further qualify you for the job to which you are applying:

C. PREVIOUS EMPLOYMENT – LAST 3 YEARS

- All other applicants please provide 3 years of employment history.
- Include any job related military service assignments and volunteer activities.

CURRENT OR MOST RECENT EMPLOYER

Are you currently employed? Yes No May we contact your current employer at this time? Yes No

NOTE: It will be necessary to contact your current employer before an offer of employment can be extended.

Employer: _____ Company Phone: _____

Company Address _____

Supervisor Name: _____ Supervisor Title: _____

Position Held/ Job Title: _____ From: _____ To: _____ Salary: \$ _____

Full Time Part Time Contract Reason for Leaving: _____

Responsibilities: _____

Employer: _____ Company Phone: _____

Company Address _____

Supervisor Name: _____ Supervisor Title: _____

Position Held/ Job Title: _____ From: _____ To: _____ Salary: \$ _____

Full Time Part Time Contract Reason for Leaving: _____

Employer: _____ Company Phone: _____

Company Address _____

Supervisor Name: _____ Supervisor Title: _____

Position Held/ Job Title: _____ From: _____ To: _____ Salary: \$ _____

Full Time Part Time Contract Reason for Leaving: _____

Responsibilities: _____

Next Previous Employer (Continued)

Employer: _____ Company Phone: _____

Company Address _____

Supervisor Name: _____ Supervisor Title: _____

Position Held/ Job Title: _____ From: _____ To: _____ Salary: \$ _____

Full Time Part Time Contract Reason for Leaving: _____

Responsibilities: _____

Are you currently employed? Yes No May we contact your current employer at this time? Yes No

Employer: _____ Company Phone: _____

Company Address _____

Supervisor Name: _____ Supervisor Title: _____

Position Held/ Job Title: _____ From: _____ To: _____ Salary: \$ _____

Full Time Part Time Contract Reason for Leaving: _____

Responsibilities: _____

Employer: _____ Company Phone: _____

Company Address _____

Supervisor Name: _____ Supervisor Title: _____

Position Held/ Job Title: _____ From: _____ To: _____ Salary: \$ _____

Full Time Part Time Contract Reason for Leaving: _____

Responsibilities: _____

Are you currently employed? Yes No May we contact your current employer at this time? Yes No

Employer: _____ Company Phone: _____

Company Address _____

Supervisor Name: _____ Supervisor Title: _____

Position Held/ Job Title: _____ From: _____ To: _____ Salary: \$ _____

Full Time Part Time Contract Reason for Leaving: _____

Responsibilities: _____

D. CRIMINAL HISTORY

Please list all misdemeanor and felony criminal matters, other than minor traffic safety violations for which no arrest was made, in which you were charged, regardless of the outcome of the case. This includes all cases that are currently pending or that ended in dismissal, conviction, probation, deferred adjudication or other program to avoid a conviction, restitution order, or participation in pre-trial diversion or other program to avoid prosecution. Also include all arrests or criminal investigations in the past 18 months for which no criminal case has been filed. **Disclosure of interaction with the criminal justice system will not necessarily eliminate you from consideration for employment. The severity of the offense, the nature of the position, and the time passed will be considered along with the rest of your qualification for the position.**

Choose one: I have no history meeting this criteria.

The full accounting of my interactions with the criminal justice system is listed below:

Jurisdiction (City, State) _____ Investigation only Arrest only Case filed

Date: _____ Offense alleged/investigated: _____

Investigation only Arrest only Case filed Outcome/Disposition: _____

Details: _____

Jurisdiction (City, State) _____ Investigation only Arrest only Case filed

Date: _____ Offense alleged/investigated: _____

Investigation only Arrest only Case filed Outcome/Disposition: _____

Details: _____

Jurisdiction (City, State) _____ Investigation only Arrest only Case filed

Date: _____ Offense alleged/investigated: _____

Investigation only Arrest only Case filed Outcome/Disposition: _____

Details: _____

Please use additional sheets as necessary to provide a full accounting of all interactions.

If you believe the information above does not adequately reflect the circumstances surrounding the case(s) listed above or if there is additional information not included elsewhere on this application that you believe the Company should be aware in evaluating your fitness for this position in light of the criminal justice information above, please provide that information below or on a separate document. Lauren Concrete, LP seeks to understand the full context of each incident in order to fairly evaluate your fitness for this position.

APPLICANT' STATEMENT AND ACKNOWLEDGMENT

1. I certify all the information furnished on this application and during the application process is true, complete, and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts requested on this application or during the application process may result in termination of the application process or my dismissal from employment at any time regardless of when the false answer or omission is discovered.
2. I recognize that this employment application is not an offer of employment nor is the Company obligated to employ me. I understand that if I am hired by the Company, I will be an at-will employee, meaning that either the Company or I may end the employment relationship at any time with or without cause.
3. I understand that the Company may share the information contained in this application with parties inside and outside of the Company for evaluation, investigation, and administrative purposes and I hereby consent to such transfer.
4. I understand and give consent that the information provided in this application may be investigated and the employers listed may be contacted for the purpose of evaluating me for employment.

Applicant Signature _____

Date _____

REFERENCES

Please list 3 professional references

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

DISCLAIMER AND SIGNATURE

I certify 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. Such information includes, if any, a resume or supplemental materials. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Print Name: _____

Signature: _____ Date: _____

DISCLAIMER AND SIGNATURE

I authorize Lauren Concrete LP to make sure investigations and inquiries to 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. I also give the employer the right to perform a criminal background check or any other verification deemed necessary by employer at their discretion. I hereby release from liability the employer and its representative for seeking, gathering, and using such information; and all other persons, corporations, or organizations for furnishing such information.

In the event of employment, I understand that any material omission, false or misleading information made by me on this application or interview(s) may be sufficient cause for cancellation of this application result in immediate discharge from the employer's service whenever it is discovered. I understand, also, that I am required to abide by all rules and regulations of Lauren Concrete, LP.

"I 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 current/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 a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information."

Lauren Concrete, LP is an equal opportunity employer. The Company's policy is not to discriminate against any applicant or employee based on race, color, sex, age, disability, religion, national origin, military or veteran status, or any other basis protected by applicable law.

This application is current for only 60 days. At the conclusions of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to complete a new application.

If I am hired, I understand that I am free to resign at any time with or without cause and without prior notice; and the employer reserves the same right to terminate my employment at any time with or without cause and without prior notice. Except as may be required by law, this application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Print Name: _____

Signature: _____

Date: _____

Authorization for the Social Security Administration (SSA) To Release Social Security Number (SSN) Verification

Printed Name:	Date of Birth:	Social Security Number:
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I want this information released because I am conducting the following business transaction:
Pre-employment background screening

Reason (s) for using CBSV: (Please select all that apply)

- Mortgage Service Banking Service
- Background Check License Requirement
- Credit Check Other

with the following company ("the Company"):

Company Name: Imperative Information Group

Company Address: 1550 West Berry St., Forth Worth, TX 76110

I authorize the Social Security Administration to verify my name and SSN to the Company and/or the Company's Agent, if applicable, for the purpose I identified.

The name and address of the Company's Agent is:

Computer Information Development LLC
713 W. Duarte Rd #106, Arcadia, CA 91007

I am the individual to whom the Social Security number was issued or the parent or legal guardian of a minor, or the legal guardian of a legally incompetent adult. I declare and affirm under the penalty of perjury that the information contained herein is true and correct. I acknowledge that if I make any representation that I know is false to obtain information from Social Security records, I could be found guilty of a misdemeanor and fined up to \$5,000.

This consent is valid only for 90 days from the date signed, unless indicated otherwise by the individual named above. If you wish to change this timeframe, fill in the following:

This consent is valid for _____ days from the date signed. _____ (Please initial.)

Signature _____ Date Signed _____

Relationship (if not the individual to whom the SSN was issued): _____

Contact information of individual signing authorization:

Address _____

City/State/Zip _____

Phone Number _____

Privacy Act Statement

SSA is authorized to collect the information on this form under Sections 205 and 1106 of the Social Security Act and the Privacy Act of 1974 (5 U.S.C. § 552a). We need this information to provide the verification of your name and SSN to the Company and/or the Company's Agent named on this form. Giving us this information is voluntary. However, we cannot honor your request to release this information without your consent. SSA may also use the information we collect on this form for such purposes authorized by law, including to ensure the Company and/or Company's Agent's appropriate use of the SSN verification service.

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 3 minutes to complete the form. *You may send comments on our time estimate above to: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. **Send to this address only comments relating to our time estimate, not the completed form.***

TEAR OFF

NOTICE TO NUMBER HOLDER

The Company and/or its Agent have entered into an agreement with SSA that, among other things, includes restrictions on the further use and disclosure of SSA's verification of your SSN. To view a copy of the entire model agreement, visit <http://www.ssa.gov/cbsv/docs/SampleUserAgreement.pdf>

LAUREN CONCRETE CONSUMER REPORT DISCLOSURE FORM

Lauren Concrete Consumer Report Disclosure Form

Lauren Concrete, LP may, with your consent, obtain a consumer report (as defined by the Fair Credit Reporting Act) from Imperative Information Group, Inc., a consumer reporting agency, related to your prospective, continued, or future employment.

This may include procurement of an investigative consumer report (defined as a report that includes information as to your character, general reputation, personal characteristics, or mode of living obtained through personal interviews). You may request that the nature and scope of any investigative consumer report be disclosed to you along with a summary of your rights under the Fair Credit Reporting Act. On request, this information will be provided within 5 days of our receipt of the request from you or five days after the date the investigative consumer report was first requested, whichever is later.

Identity Information— This information will be used only in preparing a consumer report.

First Name:

Middle Name:

Last Name:

Other Names Used:
(maiden names or aliases)

Social Security Number: - -

Date of Birth: Month: Day: Year:

Current Home Address:

City: State: ZIP:

Drivers License State: Number:

Please list each city/county and state in which you have lived, worked, or attended school during the last ten years. Use a second form if necessary to provide full disclosure.

City: OR County: State:

City: OR County: State:

City: OR County: State:

City: OR County: State:

By signing below, I authorize Lauren Concrete, LP or any of its affiliated or successor companies to obtain the consumer reports described above at any time in connection with my prospective or continued employment. I also grant permission to all parties to release information regarding my previous or current military service, employment, education, criminal, or other matters to Imperative Information Group, Inc., including information which may be deemed negative, in order to complete these reports.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on: _____
Date Signature

For California, Minnesota, or Oklahoma applicants only:

I request a copy of my consumer report be sent to the home address listed above.

Applicant's Copy

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment - or to take another adverse action against you - must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.
- In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to

the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your Federal rights contact:

TYPE OF BUSINESS:	CONTACT:
<p>1. a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center PO Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut St., Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area Supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>

9. Retailers, Finance Companies, and All Other Creditors Not Listed Above

**FTC Regional Office for region in which the creditor operates or
Federal Trade Commission: Consumer Response Center - FCRA
Washington, DC 20580 (877) 382-4357**