

Olson Gravel, Inc.

Interview Questionnaire

Version 1.1

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Questions

1. What pit are you applying for Trail or Vergas?
2. Have you ever worked in a sand and gravel operation before? If yes, Where?
3. If yes, for how long and what types of equipment, have you driven?
4. Who have you worked for in the last 10 years? Explain what you did for each.
5. List one reason for each why you are no longer working for the above employers.
6. Explain any type of mechanic work you have done on trucks or heavy equipment.
7. If work starts at 7:00 a.m. What time will you show up?
8. If hired are you willing to service the equipment that you drive or operate.
9. Are you willing to service and operate other equipment other than what you have been hired to do.
10. Do you feel that you would be able to jump into one of our trucks/equipment and drive it or operate it?
11. Do you have any injuries that limit your working ability?
12. Have you had any training in first aid or any training of any kind?
13. What hours do you want to work?
14. How many hours do you want to work and what days?
15. What do you feel you could bring to this company?

16. What position would you like? Truck driver, Loader operator, both.
17. What is your driving record like, it must be clean?
18. How long do you think you will be working here?
19. If you have a criminal recorded write down what you have been convicted of.
20. Have you ever been involved in a car accident? If yes explain.
21. Are you able to change breaks out or change a wheel seal on your own?
22. Are you any good at trouble-shooting light problems on trucks and trailers?
23. Can you weld? On a scale of 1 – 10, 10 being the best where are you?
24. Do you have any injuries that will not allow you to drive truck or operate a loader?
25. Have you or are you able to change or fix a flat tire on a truck, given that I show you how a couple of times?
26. Do you have a current drivers license?
27. Do you have a class A drivers license, write down your driver license number?
28. Do you have a current medical card?
29. Do you have a current first aid card?
30. Have you ever failed a drug test?
31. Write down your **name, address** and **phone number**.