

UNITED STATES LIME & MINERALS, INC. AND SUBSIDIARIES

APPLICATION FOR EMPLOYMENT

Position Applied for	Date:

U.S. LIME & MINERALS, INC. considers all applicants for employment without regard to race, color, religion, sex, national origin, age, handicap or disability, or status as a Vietnam-era or special disabled veteran in accordance with federal law. In addition, U.S. LIME & MINERALS, INC. complies with applicable state and local laws prohibiting discrimination in employment in every jurisdiction in which it maintains facilities. U.S. LIME & MINERALS, INC. also provides reasonable accommodations to disabled individuals in accordance with applicable laws.

Name		Social Security N	No.
Current Address Street	City	State	Zip Code
Apt. No.	Telephone N	I o.	
Are you over the age of 18?		_ If not, state your	• age:
Do you want to work full time or j	oart time?		
If part time, specify days and hou	rs:		
If available for full time, are you a	vailable to work rot	ating shift?	
Are you willing to work overtime :	as necessary?		
Date available for work:		Salary Desi	red:
Have you ever been employed by u	ıs?If yes	, approximately wl	hat dates?
Have you ever been convicted of a past ten years which has not been			
If yes, state the nature of the offen	se, when, where and	disposition:	

Federal laws require that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with such laws, U.S. LIME & MINERALS, INC. will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.

Do you have the legal right to work and remain in the United States?_____

School	Address of School	Course of Study	Number of Years	Did You	Diploma or
School	Address of School	Course of Study	Completed	Graduate?	Degree Received

RECORD OF EDUCATION

MILITARY SERVICE RECORD

Have you ever served in the U.S. Armed Forces?_____

List duties in the Service, including training that is relevant to the position for which you have applied:_____

JOB SKILLS (that you believe are related to the job for which you are applying) OFFICE SKILLS

Shorthand_____w.p.m. Typing_____w.p.m.

Other office equipment_____

Computer skills (list programs in which you are experienced)_____

INDUSTRIAL SKILLS (such as welding, cutting, heavy equipment operation or repair)

PRIOR WORK HISTORY

(List in order, last or current employer first.) Explain any gaps in your employment.

Dat	tes	Name, Address, Phone No. of Employer	Rate o	of Pay	Job Title	Reason Left
From	То		Start	Finish		

Describe in detail the work you performed:______

Dat	tes	Name, Address, Phone No. of Employer	Rate o	of Pay	Job Title	Reason Left
From	То		Start	Finish		

Describe in detail the work you performed:_____

Dat	es	Name, Address, Phone No. of Employer	Rate o	of Pay	Job Title	Reason Left
From	То		Start	Finish		

Describe in detail the work you performed:_____

Dat	es	Name, Address, Phone No. of Employer	Rate o	of Pay	Job Title	Reason Left
From	То		Start	Finish		

Describe in detail the work you performed:______

It is permissible to call my current employer. Yes_____ No_____ NA_____

PERSONAL REFERENCES (excluding relatives)

Name	Occupation	Address	Phone Number

PLEASE READ CAREFULLY! AGREEMENT

I understand that the Immigration Reform and Control Act of November 6, 1986 requires me to prove the legality of my residency or citizenship. I am also aware that the failure to provide such proof at the time of request may legally force my termination. To the best of my knowledge the information contained on this application is true and complete. I authorize investigation of all statements contained in this application as may be necessary in arriving at the employment decision or in the granting of an interview. I understand that nothing in this application is intended to create a contract between this company and me for either employment or the provision of any benefits; and further understand that if an employment relationship subsequently is established I will have the right to terminate my employment at any time and the company will have a similar right. In addition, I understand that no promise, representation or agreement contrary to the foregoing is binding on the company unless made in writing and signed by me and an authorized representative of the company.

I understand that at any time in my employment, I may be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand that I will be required to pass a DRUG SCREEN TEST before I will be employed.

I have read and understand the above statements:

Signature of Applicant

Date