



RY TIMBER, INC.

Corporate & Sales Office:

85 Mill Road, PO Box 220, Townsend, MT 59644, Phone (406)266-3111, Fax (406) 266-3115

Manufacturing Site:

5284 Hwy. 89 S, PO Box 990, Livingston, MT 59047, Phone (406)222-3360

Application Number: _____

APPLICATION FOR EMPLOYMENT

NAME: _____ DATE: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number where you may be contacted: (____) _____ Date of Birth _____

Social Security # _____ Driver's License # _____

INTERVIEW APPOINTMENT DATE: _____ TIME: _____Interviewing with _____ & _____ @ the River Office. **TOUR:** _____1. Accept Applicant for a job, based on outcome of Physical and Drug Test.
A. _____ B. _____2. File Application and call if needed.
A. _____ B. _____3. **UA Test Scheduled for:** Date: _____ Time: _____4. **Physical Scheduled for:** Date: _____ Time: _____**STATUS – EMPLOYED- On the Clock**

5. New Hire Paperwork: Date: _____ Time: _____ Initial: _____

6. Employee # _____ Initial: _____

7. Time Card Issued: _____ Initial: _____

8. **Safety Video and Training:** Date: _____ Time: _____ Initial: _____**Safety Video Completed:** Date: _____ Time: _____ Initial: _____**START WORK**9. **Job Location** _____ **Start Date:** _____ **Start Time:** _____

10. New Employee accepting New Hire Status. Signature: _____

The agreed upon starting wage is \$ _____ Initial: _____

Are you 18 years of age or older? _____ YES _____ NO

If hired, will you be able to prove your legal right to work in the United States?
_____ YES _____ NO

Do you have any condition or handicap which may limit your ability to perform any job for which you are applying, or which should be considered when determining placement?
_____ YES _____ NO

If YES, what can be done to accommodate your limitation?

Have you ever been convicted of a felony? _____ YES _____ NO _____ DATE
If YES, please explain: _____

Have you previously applied to RY Timber, Inc.? _____ YES _____ NO
If YES, when and where? _____

EDUCATION AND TRAINING

1. High School:

Name of School: _____ Years Attended _____

City of School: _____ State of School: _____

Graduate? _____ YES _____ NO _____ DATE

If NO, do you have a GED? _____ YES _____ NO _____ DATE

2. Other Schooling & Training:

Name _____ Time Studied _____

Subject studied _____

3. First Aid Certificates:

Cardiopulmonary Resuscitation (CPR) Date on card _____

Standard First Aid Training Date on card _____

Emergency Medical Technician (EMT) Date on card _____

EMPLOYMENT HISTORY

1. Previous Employer: _____ May we contact? _____ YES _____ NO

Employer _____ Dates employed _____
Address _____
City _____ State _____
Position (s) held _____
Name of last supervisor: _____ Telephone (____) _____
Last wage _____ Reason for leaving _____

EMPLOYMENT DESIRED

1. Do you want (Circle one):

Regular Employment Part –Time Employment Temporary Employment
If you want Temporary Employment, when would you terminate? _____

1. Are you willing to work
Swing Shift _____ Graveyard Shift _____, Weekend or Rotating shifts? _____

I authorize investigation of all statements contained in this application and understand that falsification of any portion will be reason for RY Timber, Inc. to not consider me for employment or to immediately discipline or discharge me.

I agree to take a physical examination and to submit to a blood or urine test, and I authorize the individuals conducting and evaluating such examinations to release the results to RY Timber, Inc.

In consideration of my employment, I agree to conform to the rules of RY Timber, Inc. but also acknowledge that my employment will be considered at-will. As an at-will employee my employment relationship with RY Timber, Inc. can be terminated at any time, with or without cause, or with or without notice at either the option of myself or RY Timber, Inc. I further understand and acknowledge that no written or verbal policies, whether express or implied may modify or nullify such at will employment.

DATE _____ SIGNATURE _____

Affirmative Action/Equal Opportunity Employer



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DRUG TEST CONSENT FORM

By my signature below, I _____, acknowledge RY Timber, Inc. has a “ZERO TOLERANCE” Drug Free program. I understand this includes prescribed medical marijuana or possibly other medications. I agree to comply with this policy as a condition of continued employment of RY Timber, Inc.

By signing this Consent Form, I authorize RY Timber, Inc. management and the licensed laboratory selected by RY Timber, Inc. to perform a urinalysis on any urine specimen provided by me to test for the use of any chemical substance which could affect my work abilities, worker or equipment safety or physical health.

Result of these tests will be treated in a confidential manner.

In the event of a reasonable suspicion by either RY Timber, Inc. or the laboratory that the specimen has been altered or the test is inaccurate, I agree to submit another specimen(s) for further testing as requested by RY Timber, Inc.

I further agree to submit to a blood test for alcohol at any time RY Timber, Inc. has a reasonable suspicion that I may be under the influence of alcohol.

Any employment with RY Timber, Inc. will be contingent upon passing a pre-employment drug screen.

Applicant Signature

Date

Dan Richards,
General Manager



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SPECIAL EMPLOYMENT NOTICE TO DISABLED VETERANS, VIETNAM ERA VETERANS AND INDIVIDUALS WITH PHYSICAL OR MENTAL HANDICAPS.

Due to Section 402 of the Vietnam Era Veterans Readjustment Act of 1974 which requires that this company take Affirmative Action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which requires this company to take Affirmative Action to employ and advance in employment qualified handicapped individuals.

If you are a disabled veteran, or have a physical or mental handicap, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you to perform the job in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect any consideration you may receive for employment.

If you wish to be identified, please check any that apply below:

_____ Handicapped Individual

_____ Veteran Served from _____ to _____

Disabled _____ YES _____ NO

SIGNATURE REQUIRED

(This page to be given to person responsible for EEO reporting and is not to be kept in employee file.)



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RY Timber Minimum Job Requirements

Job Title: Entry Level Position

Date: 4-14-06

GENERAL JOB DESCRIPTION:

Worker stacks finished 2x4's that are 4 to 8 ft long from conveyor belt to cart on wheels. Loaded carts are 26 boards high, 13 boards wide for 4-7 ft boards; and 14 boards wide x 21 boards high for 8 ft boards. Filled carts stand 4 ½ ft to 5 ½ ft tall. Conveyor belt is thigh to hip high. Worker grabs board, and turns to shove onto cart 2-5 ft away. Worker starts with empty cart and puts wood on bottom of cart, which is about 1/12 ft off ground. Adds boards to make rows until full, eventually reaching to shoulder or just above shoulder height. Worker puts metal band around cart load and crimps with hand held bander. Worker pushes cart 10-25 ft away from area so that forklift can pick it up.

Worker spends 2/3 of 10 hr work shift at this location with another worker. Cart usually pushed with two people (90 % of time when in this location).

Worker spends 1/3 of shift (3.4 hrs) performing same job at different stacker location, stacking 8-9 ft 2x4's. Pace slower at this location and worker works alone.

Each worker builds one pallet or cart load of boards per hour as a rule. Worker may sweep area and clean up every once a week or two.

Shifts are 10 hrs long, four days per week.

I. PHYSICAL DEMANDS

STANDING, WALKING and SITTING

Worker sits on breaks only, two 15 min breaks and lunch break.

KNEEL, SQUAT/CROUCH, CLIMB, BALANCE

Worker climbs onto cart and load to straighten boards or to complete banding with crimper.

Worker may squat instead of bending to pick up boards if they fall.

REACHING

Height of reach varies depending on how high the stack is. Highest level reached is about 5 ½ ft and this occurs to complete the stacking process as boards reach the top of the load and to wrap the band around the load. Crimper is a hand held device that is pulled down to band the metal together and is done at the top of the load. Worker can climb up on side of cart to do this if preferred. Use of the arms is continuous (more than 67%) overall. On slower side, there may be moments when boards are not coming down the conveyor.

PUSHING/PULLING

Cart with 8 ft boards weigh 3000 lbs. Carts with 4 ft boards weigh 1500 lbs. Effort to push them is about 10 % of the gross weight when on wheels. Two people push the carts 90% of the time when the worker is on the side where two people work. Worker would push 10 carts with help and 5-6 carts per day alone.

LIFTING

Weight of an 8 ft 2x4 is 3 lbs.

CARRYING

Worker walks up and down conveyor to access wood; may carry it a few feet to stack but usually stays within small area and takes a step or two to push it from conveyor to stack.

TORSO-TWIST, BEND/STOOP, ETC

Can pivot and turn to avoid twisting; can squat to avoid bending.

II. ENVIRONMENTAL CONDITIONS:

ENVIRONMENTAL

Noise from equipment in the area; some dust but wood is already finished in this area and dust is minimal. Hazards associated with sawmill work, moving equipment and pushing objects.

Are you able to perform these minimum requirements?

Yes

No

Applicant Signature

Date