COMMERCIAL DRIVER APPLICATION

Company				
Address				
				Zip
		APPLICANT INI	FORMATIO	N
DATE		Position applying for:	Contractor	Driver Contractor's Driver
NAME		-		
PHONE ()	EMERG	ENCY PHO	NE ()
AGE	DA	TE OF BIRTH		SS# ge with respect to individuals who are at least -
		TON DATE		
CURRENT & P	PREVIOUS TH	REE YEARS ADDRESSES:	FROM	ТО
			_FROM FROM	ТО
			FROM	ТО
If yes, give date Reason for leav EDUCATIO Please circle the	s: From ing? N HISTOR	Y: completed: Grade school: 1	234567	
		EMPLOYMENT	T HISTORY	:
		of all employment for the past ommercial driving experience fo		including any unemployment or self 0) years.
Mo/Yr	Mo/Yr	Present or Last Employe	r	
From	To	Name		
Position Held		Address		

 Were you subject to the FMCSRs while employed here?
 Yes
 No

 Was your job designated as a safety-sensitive function in any DOT- regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40?
 Yes
 No

Mo/Yr From	Mo/Yr To	Present or Last Employ Name	/er		
Position Held		Address			
Reason for lea	aving		Company pho	one ()	
Were you sub	ject to the FMCSR	s while employed here?	Yes		No
	designated as a sate ments of 49 CFR	fety-sensitive function in any Part 40?	DOT- regulated mode su Yes	ubject to the d No	rug and alcohol

From	Mo/Yr To	Present or Last Employer Name		
Position Held				
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Were you subj Was your job c	ect to the FMCSR designated as a saf	s while employed here? Fety-sensitive function in any DO Part 40?	Yes T- regulated mode subject to	e
Mo/Yr From	Mo/Yr To	Present or Last Employer Name		
Position Held_		Address		
Reason for leav	ving		Company phone ()
Was your job c	designated as a saf	s while employed here? Fety-sensitive function in any DO Part 40?Ye		
Mo/Yr From	Mo/Yr To	Present or Last Employer Name		
Position Held_		Address		
Reason for leav	ving		Company phone ()
Was your job o	designated as a saf	s while employed here? fety-sensitive function in any DO Part 40?		
Mo/Yr From	Mo/Yr To	Present or Last Employer Name	-	
		Address		
Position Held				
Position Held_ Reason for leav	ving		Company phone ()
Reason for leav Were you subj Was your job c	ect to the FMCSR	s while employed here? ety-sensitive function in any DO	Yes F- regulated mode subject to	•
Reason for leav Were you subj Was your job c	ect to the FMCSR designated as a saf	s while employed here? ety-sensitive function in any DO Part 40? Ye Present or Last Employer	Yes F- regulated mode subject to	the drug and alcohol
Reason for lea Were you subj Was your job c testing requirer Mo/Yr	ect to the FMCSR lesignated as a saf ments of 49 CFR I Mo/Yr	s while employed here? ety-sensitive function in any DO Part 40? Ye Present or Last Employer	Yes F- regulated mode subject to sNo	the drug and alcohol
Reason for lea Were you subj Was your job c testing require Mo/Yr From	ect to the FMCSR designated as a saf ments of 49 CFR I Mo/Yr To	s while employed here? Yety-sensitive function in any DO Part 40? Ye Present or Last Employer Name	Yes	the drug and alcohol

DRIVING EXPERIENCE

Class of Equipment	From	То	Approximate Number of Miles
Straight Truck			
Tractor & Semi- trailer			
Tractor & two trailers			
Tractor & triple trailers			
Other			

List states operated in, for the last five (5) years:

List special courses/training completed (PTD/DDC, HAZMAT, ETC)

List any Safe Driving Awards you hold and from whom:

Accident Record for past three (3) years: (attach sheet if more space is needed):

Date of Accident	Nature of Accidents (Head on, rear end, etc)	Location of Accident	# of Fatalities	# of People Injured
	6			

Traffic Convictions and Forfeitures for the last three (3) years (other than parking violations):

Date	Location	Charge	Penalty

Driver's License (list each driver's license held in the past three(3) years:

State	License	Туре	Endorsements	Expiration Date

Have you ever been denied a license, permit or privilege to operate a motor vehicle?	Yes	No
Has any license, permit or privilege ever been suspended or revoked?	Yes	No
Is there any reason you might be unable to perform the functions of the job for which you	1 have applied (as d	lescribed in
the job description)?	Yes	No
Have you ever been convicted of a felony?	Yes	No

If the answers to any questions listed above are "yes", give details

Job References

List three (3) persons for references, other than family members, who have knowledge of your safety habits.

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

To Be Read and Signed by Applicant:

It is agreed and understood that any misrepresentation given on this application shall be considered an act of dishonesty.

It is agreed and understood that the motor carrier or his agents may investigate the applicant's background to obtain any and all information of concern to applicant's record, whether same is of record or not, and applicant releases employers and person named herein from all liability for any damages on account of his furnishing such information.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an investigating Consumer Report, including information regarding my character, general reputation, personal characteristics, and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my application file.

It is agreed and understood that this Application in no way obligates the motor carrier to employ or hire the applicant.

It is agreed and understood that if qualified and hired, I may be on a probationary period during which time I may be disqualified without recourse.

This certifies 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.

Appl	icant	Signat	ture
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Date

Remarks: (For office use only)