

Employment History

All applicants are required to give an accurate employment history for which a resume may be provided.

All driver applicants to drive in interstate commerce must provide the following information on **all** employers during the preceding 3 years. List complete mailing address; street number, city, state & zip code. Applicants to drive a commercial motor vehicle (*includes vehicles having a GVWR of 26 lbs. or more, vehicles designed to transport 15 or more passengers or any size vehicle used to transport hazardous materials in a quantity in requiring placarding intrastate or interstate commerce) shall provide an additional 7 years information on those employers for whom the applicant operated such vehicle.

EMPLOYER			DATE	
NAME			FROM MO.	TO YR. MO. YR.
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY IWAGE	
CONTACT PERSON		PHONE NUMBER	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM MO.	TO YR. MO. YR.
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY IWAGE	
CONTACT PERSON		PHONE NUMBER	REASON FOR LEAVING	

EMPLOYER			DATE	
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EMPLOYER			DATE	
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ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY IWAGE	
CONTACT PERSON		PHONE NUMBER	REASON FOR LEAVING	

Education

Circle Highest grade completed: 1 2 3 4 5 6 7 8 High School 1 2 3 4 College 1 2 3 4 Degree? _____

Do you possess a diploma or GED? _____

Training, Experience, Qualifications and/or Award

Show any trucking transportation or other experience or qualifications that may help you in your work for this company: _____

THIS PAGE FOR DRIVER APPLICANTS ONLY

Accident Record for past 3 Years or more (attach sheet if more space is needed) Otherwise, write "none".

Dates	Nature of Accident (head-on, rear-end, up-set, etc)	Fatalities	Injuries

Traffic Convictions and forfeitures for the past 3 years (other than parking violations) Otherwise, write "none".

Date	Location	Charge	Penalty

Experience and Qualifications- Driver

Drivers Licenses:	State	License No.	Type	Expiration Date

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? _____

B. Has any license, permit or privilege ever been suspended or revoked? _____

If the answer to either A or B is yes, attach statement giving details.

Driving Experience

Class of Equipment	Type of Equipment (Van, Tank, Flat, etc.)	Dates		Approx. No. of Miles (total)
		From	To	
Straight Truck				
Tractor & Semi-trailer				
Tractor-two trailers				
Motor-coach- school bus				
Other _____				

List States operated in for last 5 years: _____

TO BE READ AND SIGNED BY APPLICANT

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. I authorize you to make such investigations and inquires of 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.)

_____ Date

_____ Applicant's Signature