

APPLICATION INSTRUCTIONS

Thank you for your interest in employment with our company. We appreciate your application. Please complete the attached, and authorization for release information forms. Please print information legibly, and don't leave any empty questions, use the abbreviation if a particular provision or section in the forms is not applicable to you. Incomplete applications will not be processed.

Employment decisions are made solely based on the qualifications to perform the work of a commercial truck driver. Any driver to be used in the transportation of property must be qualified in accordance with the requirements of the federal motor carrier safety regulations part 383 and part 391, as listed below. Credentials and experience will be verified through schools, former employers and any licensing/certification agencies, if applicable.

QUALIFICATION REQUIREMENTS

the purpose of the Federal Motor Carrier Safety Regulations is to promote the safety of operations on the Nation's highways, not only for the general driving public, but also for the carriers and their drivers. The qualification's prescribed for driver's subject to these regulation's include those areas which have been found to be of primary significance in providing safety conscious drivers for the motor carrier industry. The regulations specify a driver to be qualified to drive a motor vehicle if he/she.

- ✓ Is at least 21 years of age
- ✓ Can read and speak English language sufficiently to converse with the general public, to understand highway traffic signs and signals in the English language, to respond to official inquiries, and to make entries on reports and records.
- ✓ Can by reason of experience, training, or both, safely operate the type of motor vehicle he/she
 drives
- ✓ Can, by reason of experience, training or both, determine whether the cargo he transports (including baggage in a passenger-carrying motor vehicle) has been properly located, distributed, and secured in or on the motor vehicle he/she drives.
- ✓ Is familiar with methods and procedure for securing cargo in or on the motor vehicle he/she drives.
- ✓ Is physically qualified to drive a motor vehicle in accordance with subpart # physical qualifications and examinations of part 391 and able to meet the physical demands as listed in the Company's job Analysis Schedule, including medium level lifting (70-100 lbs.).
- √ Has a current valid commercial motor vehicle under the rules in sec. 391.15
- √ Has successfully completed a driver`s road test in accordance with section 391.33
- ✓ Has completed and furnished the motor carrier that employs him/ her with and application for employment in accordance with section 391.21

As an Equal Opportunity employer, decisions to hire and promote are made without regard to race, color, creed, national origin, sex, physical or mental disability (unrelated to ability to do the job), or age (defined by law).





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Tele	ephone	Numbers:									
				EACH	ADDRESS	FOR THE LAS	T THREE (3) YEARS			
Add	dress:	[[City] [State			o l Tin C	ada 1		How long	?	
		[Street]	L	City j	[Stat	e] [Zip C	ode j				
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Driver											
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license



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Adverse Licensing Actions: A. Have you ever been denied a license, permit, or privilege to operate a motor vehicle? Yes No _ B. Has any license, permit, or privilege to operate a motor vehicle been suspended or revoked? Yes Explain below (if yes)						
		t if needed)				
commercial univing experience for t	tile past 10 years.					
LAST EMPOYER						
Company:		From				
Address: Position Held:	Salarv Ś	Per				
Subject to FMCSR`s?						
Reason for Leaving:	<u> </u>					
SECOND EMPLOYER						
Company:		From:				
Address:						
Position Held:						
Subject to FMCSR`s?						
Reason for Leaving:						
THIRD EMPLOYER						
Company:		- From:				
Position Held:	Salary \$	Per				
Subject to FMCSR's	Subject to D.O.T. Alcoho	No				
D f 1 i						
This certifies that this application w	vas completed by me, and that all e	entries on it and information	on in it			
are true and correct.	and semplesed by me, and must all					



EMPLOYMENT APPLICATION FORM - Additional Page

	ent Record (attach another sheet if needed) st employment history for at least the last 3 years and your r the past 10 years.	
LAST EMPOYER		
Company:	From:	
	To:	
Position Held:		
	Subject to D.O.T. Alcohol and Drug testing? Yes I	
242,000 10 1110011 3.		
Reason for Leaving: SECOND EMPLOYER	From:	
Reason for Leaving: SECOND EMPLOYER Company: Address: Position Held: Subject to FMCSR's?		
Reason for Leaving: SECOND EMPLOYER Company: Address: Position Held: Subject to FMCSR's?	From: To: Per Salary \$ Per Subject to D.O.T. Alcohol and Drug testing? Yes I	
Reason for Leaving: SECOND EMPLOYER Company: Address: Position Held: Subject to FMCSR's? Reason for Leaving: THIRD EMPLOYER	From: To: Per Salary \$ Per Subject to D.O.T. Alcohol and Drug testing? Yes I	No .
Reason for Leaving: SECOND EMPLOYER Company: Address: Position Held: Subject to FMCSR's? Reason for Leaving: THIRD EMPLOYER Company: Address:	From: From: To: Per Salary \$ Per Per Per From: From: From: To:	No .
Reason for Leaving: SECOND EMPLOYER Company: Address: Position Held: Subject to FMCSR's? Reason for Leaving: THIRD EMPLOYER Company: Address: Position Held:	From: From: To: Salary \$ Per Per From: From: To: Salary \$ Per	No .
Reason for Leaving: SECOND EMPLOYER Company: Address: Position Held: Subject to FMCSR's? Reason for Leaving: THIRD EMPLOYER Company: Address: Position Held:	From: From: To: Per Salary \$ Per Subject to D.O.T. Alcohol and Drug testing? Yes I	No .



EMPLOY	MENT APPLICATION FORM - Additi	onal Page					
Employment Record (attach another sheet if needed) NOTE: USDOT requires that you list employment history for at least the last 3 years and your commercial driving experience for the past 10 years.							
LAST EMPOYER							
Company:		From:					
Position Held:	Salary \$	Per					
Subject to FMCSR`s?	Subject to D.O.T. Alcohol	and Drug testing? Yes	No _				
Reason for Leaving:							
SECOND EMPLOYER							
Company:		From:					
Address:		To:					
	Salary \$						
	Subject to D.O.T. Alcohol	and Drug testing? Yes _	No _				
Reason for Leaving:							
THIRD EMPLOYER							
Company:		From:					
Position Held:	Salary \$	Per					
Subject to FMCSR`s	Subject to D.O.T. Alcohol	Subject to D.O.T. Alcohol and Drug testing? Yes					
Reason for Leaving:							

This certifies that this application was completed by me, and that all entries on it and information in it

Date: _____

are true and correct.

Applicants signature:



EMPLOYMENT APPLICATION FORM - Additional Page

Employment Record (attach another sheet if needed) NOTE: USDOT requires that you list employment history for at least the last 3 years and your commercial driving experience for the past 10 years. **LAST EMPOYER** Company: _____ From: _____ Address: ______ To: _____ Position Held: ______ Per _____ Subject to FMCSR`s?_____ Subject to D.O.T. Alcohol and Drug testing? Yes___ No ____ Reason for Leaving: **SECOND EMPLOYER** Company: _____ From:_____ Address: ______ To: _____ Position Held: ______ Salary \$ _____ Per _____ Subject to FMCSR's? ______ Subject to D.O.T. Alcohol and Drug testing? Yes ____ No _____ Reason for Leaving: _____ THIRD EMPLOYER Company: _____ From:_____ Address: ______ To: ______

Position Held: _____ Salary \$ ____ Per ______ Subject to FMCSR's _____ Subject to D.O.T. Alcohol and Drug testing? Yes ____ No ____ Reason for Leaving: This certifies that this application was completed by me, and that all entries on it and information in it are true and correct.

Date: _____

Applicants signature: