



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 an 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).



EMPLOYMENT APPLICATION FORM - PAGE 2

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 ___ No ___
- Explain below (if yes)**

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 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: _____

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.

Applicants signature: _____ **Date:** _____



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 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: _____

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.

Applicants signature: _____ **Date:** _____



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 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: _____

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.

Applicants signature: _____ **Date:** _____



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 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: _____

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.

Applicants signature: _____ **Date:** _____