



## EDUCATION

**Circle Highest Grade Completed:** 7 8 9 10 11 12

**College:** 1 2 3 4

Name	City/State	Yr. Graduated	Degree
High School _____	_____	_____	_____
College _____	_____	_____	_____
Trade School _____	_____	_____	_____
Other _____	_____	_____	_____

*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 and zip code. Applicants to drive a commercial motor vehicle in intrastate or interstate commerce shall also provide an additional 7 years' information on those employers for whom the applicant operated such vehicle.*

EMPLOYER	DATE
NAME	FROM: TO:
ADDRESS	POSITION HELD
CITY STATE ZIP	SALARY/WAGE
CONTACT PERSON PHONE NUMBER	REASON FOR LEAVING

EMPLOYER	DATE
NAME	FROM: TO:
ADDRESS	POSITION HELD
CITY STATE ZIP	SALARY/WAGE
CONTACT PERSON PHONE NUMBER	REASON FOR LEAVING

EMPLOYER	DATE
NAME	FROM: TO:
ADDRESS	POSITION HELD
CITY STATE ZIP	SALARY/WAGE
CONTACT PERSON PHONE NUMBER	REASON FOR LEAVING

EMPLOYER	DATE
NAME	FROM: TO:
ADDRESS	POSITION HELD
CITY STATE ZIP	SALARY/WAGE
CONTACT PERSON PHONE NUMBER	REASON FOR LEAVING

EMPLOYER	DATE
NAME	FROM: TO:
ADDRESS	POSITION HELD
CITY STATE ZIP	SALARY/WAGE
CONTACT PERSON PHONE NUMBER	REASON FOR LEAVING

EMPLOYER			DATE	
NAME			FROM:	TO:
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM:	TO:
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM:	TO:
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM:	TO:
ADDRESS			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON		PHONE NUMBER	REASON FOR LEAVING	

**Person to Notify in case of emergency** \_\_\_\_\_  
**Please include daytime phone number**

**TO BE READ AND SIGNED BY APPLICANT**

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I understand that the information provided herein may be used and that my prior employers may be contacted for the purpose of investigating my background. I further understand and agree that if hired my employment is "at will" for no definite period, and may regardless of the date of payment of my wages or salary, be terminated at any time without any prior notice, for any reason, and that it in no way is to be construed as a contract of employment.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**DOT Supplemental Information**

**Accident record for past 3 years or more (attach sheet if more space is needed) if none, write none**

DATES	TYPE OF ACCIDENT	FATALITIES	INJURIES
Last Accident			
Next Previous			
Next Previous			

**Traffic convictions and forfeitures for the past 3 years (other than parking tickets) if none, write none**

LOCATIONS	DATE	CHARGE	PENALTY

**Experience and qualifications – Driver**

DRIVER LICENSES INFORMATION			
STATE	LICENSE NO.	TYPE	EXPIRATION DATE

Date of Birth \_\_\_\_\_ Can you provide proof of age? \_\_\_Yes \_\_\_No  
Required for Commercial Drivers)

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

\*If the answer to either above questions is YES, attach statement-giving details.

**Driving Experience if none, write none**

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT	APPROX. # OF MILES	DATE	
			FROM	TO
STRAIGHT TRUCK				
TRACTOR TRAILER				
10 WHEELER				
OTHERS				

List states operated in for the last five years \_\_\_\_\_

List other pertinent skills or experiences \_\_\_\_\_

**Authorization to Release Information**

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I understand that the information provided herein may be used and that my prior employers may be contacted for the purpose of investigating my background. I further understand and agree that if hired my employment is "at will" for no definite period, and may regardless of the date of payment of my wages or salary, be terminated at any time without any prior notice, for any reason, and that it in no way is to be construed as a contract of employment.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_