

OVER-THE-ROAD DRIVER ADDITIONAL APPLICATION FOR EMPLOYMENT

NAME _____
(FIRST) (MIDDLE) (LAST)

ADDRESS _____
(STREET) (CITY) (STATE & ZIP)

PHONE NUMBER _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

ADDRESS FOR PAST THREE YEARS } _____
(STREET) (CITY) (STATE & ZIP) HOW LONG?

_____ } _____
(STREET) (CITY) (STATE & ZIP) HOW LONG?

(ATTACH SHEET IF MORE SPACE IS NEEDED)

EXPERIENCE AND QUALIFICATIONS – DRIVER

DRIVER LICENSES	STATE	LICENSE NO.	TYPE	EXPIRATION DATE

DRIVING EXPERIENCE

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.)	DATES		APPROXIMATE NO. OF MILES (TOTAL)
		FROM	TO	
STRAIGHT TRUCK				
TRACTOR AND SEMI-TRAILER				
TRACTOR-TWO TRAILERS				
OTHER				

ACCIDENT RECORD FOR PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED)

	DATES	NATURE OF ACCIDENT (HEAD-ON, REAR-END, UPSET, ETC.)	FATALITIES	INJURIES
LAST ACCIDENT				
NEXT PREVIOUS				
NEXT PREVIOUS				

TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)

LOCATION	DATE	CHARGE	PENALTY

(ATTACH SHEET IF MORE SPACE IS NEEDED)

- 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 ever been suspended or revoked? YES _____ NO _____
IF THE ANSWER TO EITHER A OR B IS YES, ATTACH STATEMENT GIVING DETAILS

**EMPLOYMENT RECORD
(ATTACH SHEET IF MORE SPACE IS NEEDED)**

NOTE: DOT REQUIRES That Employment for at Least 3 Years and/or Commercial Driving Experience for the Past 10 Years Be Shown

LAST EMPLOYER: NAME _____
ADDRESS _____
POSITION HELD _____ FROM _____ TO _____ SALARY _____
REASONS FOR LEAVING _____

SECOND LAST EMPLOYER: NAME _____
ADDRESS _____
POSITION HELD _____ FROM _____ TO _____ SALARY _____
REASONS FOR LEAVING _____

THIRD LAST EMPLOYER: NAME _____
ADDRESS _____
POSITION HELD _____ FROM _____ TO _____ SALARY _____
REASONS FOR LEAVING _____

TO BE READ AND SIGNED BY APPLICANT

This certifies that this application was completed by me, and that entries on it and information in it are true and complete to the best of my knowledge.

DATE

APPLICANT'S SIGNATURE