



COMMERCIAL MOTOR VEHICLE DRIVER'S EMPLOYMENT APPLICATION

(Please answer all questions and print legibly.)

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status or non-job related disability.

First Name: _____ Middle Initial: _____ Last Name: _____

Social Security #: _____ Date of Birth: _____ PHONE #: _____

Do you have the legal right to work in the United States? YES NO Can you produce proof of age? _____
(Required for commercial motor vehicle drivers.)

Current Address:

Street City

State Zip Code How long at this address? _____

List Addresses of residency for the past 3 years.
PREVIOUS ADDRESSES:

Street City, State, Zip Code How Long? _____

Street City, State, Zip Code How Long? _____

Do you have a Passport or Passcard? YES NO Do you have a TWIC Card? YES NO
Have you ever been charged with a DUI? YES NO Have you ever been convicted of a felony? YES NO
Details: _____ Details: _____

Have you worked for this company before? _____ Where? _____

Dates: From _____ to _____ Position: _____

Reason for Leaving : _____

CURRENTLY EMPLOYED: YES NO If not, how long since leaving last employment? _____

Were you referred? YES NO By whom: _____

DRIVING EXPERIENCE: If None, Write None

Class of Equipment	TYPE (Van, Tank, Flat)	Dates: From	To	Approx. # of Miles (Total)

(if more experience, please list additional information.)

Additional employment details may be required at an interview appointment.