

Driver Application for Employment



Personal Information

Name _____ Date _____
 Address _____

PO Box 427, Gap PA 17527
 (717) 442-8280

Date of Birth _____ Social Security # _____
 Phone # _____ Cellular/Other Phone _____
 Email address: _____

Are you legally eligible for employment in this country? Yes No

Circle Last Grade Completed: 1 2 3 4 5 6 7 8 9 10 11 12 College: 1 2 3 4

Other Training _____

Valid Driver's License Number _____ State _____ Expires on _____

License Type (ie: CDL Class A, Class 1, etc.) _____ List CDL endorsements _____

Have you ever been denied a permit, license, or privilege to operate a commercial motor vehicle? Yes No

Has your license permit or privilege been suspended or revoked? Yes No

If yes, explain _____

Do you have full knowledge of the Federal Motor Carriers Safety Regulations? Yes No

Driving Experience

Equipment	Type of Equipment	# of yrs.	State Driven In
Straight Truck			
Tractor Trailer	Power Unit: _____ Trailer: _____		
Bus	School: _____ Coach: _____		
Other (specify)			

Accident Record Last Three Years

Date	Nature of Accident (overturn, jack knife, rear end, etc.)	No. of Fatalities	No. of Injuries	Commercial Vehicle	Personal Automobile

Traffic Convictions & Forfeitures Last Three Years (Other than Parking)

State	Date	Charge	Penalty	Commercial Vehicle or Automobile

References

People that can help validate information from the application (ie: former employers, managers, supervisors, work associates)

Name	Telephone	# of Years Known	Position

People that can help validate information your character (ie: personal friend, mentor)

Name	Telephone	# of Years Known

Employment Desired

Position applied for _____ Date available for work _____
 Desired Salary Range _____ Are you employed now? Yes No
 Have you ever been employed here before? If yes, give dates and positions. Yes No
 Referred by _____
 Type of employment desired Full-Time Part-Time Seasonal
 Have you ever pled "Guilty" or "no contest" to, or been convicted of a crime? Yes No
 If yes, please provide date(s) and details _____

Employment History for past 10 years (use separate sheet if necessary)

From	To	Employer	Phone
Job Title		Address	
Immediate Supervisor/Title		Summarize the nature of work and job responsibilities	
May we contact for references <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Hourly Rate/Salary	Reason for Leaving

From	To	Employer	Phone
Job Title		Address	
Immediate Supervisor/Title		Summarize the nature of work and job responsibilities	
May we contact for references <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Hourly Rate/Salary	Reason for Leaving

From	To	Employer	Phone
Job Title		Address	
Immediate Supervisor/Title		Summarize the nature of work and job responsibilities	
May we contact for references <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Hourly Rate/Salary	Reason for Leaving

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me. I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law. I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application. If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president. I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date _____