

DRIVER RECORD / EXPERIENCE

(LICENSE)

List all drivers licenses / permits you have held in last 5 years

State	License Number	Type	Expiration Date

TRAFFIC CONVICTIONS / FORFEITURES

List all car, truck, etc. moving convictions and forfeitures for the past 5 years (if none write NONE)

Date	Location (State)	Charge	Penalty

ACCIDENT RECORD

List all accidents with truck, car, etc. for the past 5 years. Include preventable and non preventable (If none write NONE)

Date	Type of Vehicle	Nature of Accident head on , rear end, etc	Preventable or NON Preventable	Fatalities	Injuries	Amount of property damage
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

EXPERIENCE

	OTR or Local	Trailer Length	DATES		Approx # of miles	Type of material hauled
			From	To		
Tractor with Flat Bed						
Tractor with Van						
Tractor with Reefer						
Straight Truck						
Other (Specify)						

Show special courses of training that will help you as a driver.

Which safe driving awards do you hold and from whom? _____

- A) Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No
- B) Have you ever had any license, permit or privilege suspended or revoked? Yes No
- C) Have you ever been convicted of a felony or any other Criminal Offense? Yes No
- D) Have you ever been disqualified to drive by Federal Regulations? Yes No
- E) Are you able to enter Canada? Yes No

EDUCATION

Circle Highest Grade completed 1 2 3 4 5 6 7 8 9 10 11 12

College Attended: _____ Last School Attended Name: _____

City: _____ State: _____

Driving school: _____ Graduation Date: _____

MILITARY STATUS:

Have you served in the U.S. Armed Forces? Yes No Branch? _____

Honorable Discharge? Yes No