

APPLICATION ADDENDUM FOR EMPLOYMENT REQUIRING DRIVING

COMPANY _____

ADDRESS _____

NAME _____ PHONE: (____) _____
First Middle Last

DRIVER LICENSES: (list all licenses held in past 3 years and indicate those that are current)
List **State, License Number, Class, Endorsement(s), Expiration date** for each:

Have you ever been denied, or have been revoked or suspended any license, permit, or privilege to operate a motor vehicle? Yes _____ No _____

If you answered YES to the above questions, give details: (if additional space is needed, attach sheet).

TRAFFIC CONVICTIONS AND FORFEITURES FOR PAST 5 YEARS:

(Other than parking)

List **Location (City & State), Date, Charge and Penalty** for each:

DRIVING EXPERIENCE:

List **Dates, Class of Equipment, and approximate number of total miles** for each:

Automobile _____

Van/Pickup _____

Truck/Tractor _____

Bus _____

Other (Specify) _____

ACCIDENT RECORD FOR PAST 5 YEARS: (if additional space is needed, attach sheet)

List **Date, Location, and Nature of Accident including injuries and fatalities** as they apply for each year:

GENERAL:

Have you ever been convicted of a felony? Yes _____ No _____

Have you ever been refused bond Yes _____ No _____

If you answered YES to either question, give details: (if additional space is needed, attach sheet)

LIST SPECIAL TRAINING RELATED TO TRANSPORTATION:

(If additional space is needed, attach sheet)

TO BE READ AND SIGNED BY APPLICANT:

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I understand that, if hired, any misrepresentation of information in this application is cause for immediate dismissal. I authorize (INSERT COMPANY NAME HERE) to investigate my background to ascertain all information of concern to my employment history, whether same is of record or not, and release those providing such information from all liability for any damages resulting from furnishing this information. Further, I understand that I may be asked to demonstrate my ability to perform the essential functions necessary to complete the job and, if offered the job, that it may be conditioned on results of a physical examination, and controlled substances and alcohol misuse test.

DATE _____

APPLICANT'S SIGNATURE _____