# APPLICATION FOR EMPLOYMENT FORM ADDENDUM FOR POSITIONS THAT REQUIRE DRIVING A COMMERCIAL MOTOR VEHICLE 

(Only complete this form if you are applying for a position requiring a commercial driver license)
All applicants for positions requiring the operation of a commercial motor vehicle must complete the following information. A 'commercial motor vehicle' includes vehicles with a gross vehicle weight rating (GVWR) of more than $\mathbf{2 6 , 0 0 0}$ pounds; drivers of vehicles designed to transport 16 or more passengers, including the driver; and drivers of vehicles used to transport hazardous materials, regardless or whether the vehicles operate interstate or intrastate.

| $*$ <br> DRIVER <br>  <br>  | STATE | LICENSE NUMBER | TYPE |  |
| :---: | :---: | :---: | :---: | :---: |

1) Have you ever been denied a license, permit or privilege to operate a motor vehicle?$\square$ No
2) Has any license, permit or privilege ever been suspended or revoked?
$\square$ Yes

If the answer to questions (1) or (2) is 'yes', please provide details:

List states operated in for last five years:
DRIVING EXPERIENCE - IF NONE, WRITE 'NONE'

| CLASS OF EQUIPMENT | TYPE OF EQUIPMENT <br> (VAN, TANK, FLAT, ETC.) | DATES OPERATED <br> (FROM / TO) | APPROXIMATE NUMBER OF <br> MILES DRIVEN |
| :--- | :---: | :---: | :---: |
| Straight Truck |  |  |  |
| Tractor and/or Semi-Trailer |  |  |  |
| Tractor - Two Trailers |  |  |  |
| Motor coach and/or School Bus |  |  |  |
| Other |  |  |  |

List any relevant courses or training completed as a driver:

List any trucking, transportation or other experience that you feel would support your application:

ACCIDENT AND TRAFFIC CONVICTIONS RECORD - LIST ALL ACCIDENTS FOR PAST THREE YEARS - IF NONE, WRITE 'NONE'

| DATES | NATURE OF ACCIDENT |  |  |
| :---: | :---: | :---: | :---: |
|  | (HEAD-ON, REAR-END, UPSET, ETC.) | FATALITIES | INJURIES |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

(ATTACH SHEET IF MORE SPACE IS NEEDED)
LIST ALL TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST THREE YEARS (OTHER THAN PARKING VIOLATIONS) - IF NONE, WRITE 'NONE'

| LOCATION | DATE | CHARGE | PENALTY |
| :---: | :---: | :---: | :---: |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

