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 26,000 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.

	STATE	LICENSE	NUMBER	TYPE		EXPIRATION DATE
DRIVER						
LICENSES						
1) Have you ever been denied a license, permit or privilege to operate a motor vehicle?						☐ No
2) Has any lie	cense, permit or privil	ege ever been suspende	ever been suspended or revoked?		s	□ No
If the answer to o	questions (1) or (2) is	'yes', please provide det	ails:			
List states opera	ted in for last five yea	rs:				
DRIVING EXPER	RIENCE – IF NONE, V	WRITE 'NONE'				
CLASS OF EQUIPMENT		TYPE OF EQU	TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.))	APPROXIMATE NUMBER OF MILES DRIVEN
Straight Truck						
Tractor and/or Semi-Trailer						
Tractor – Two T	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' NATURE OF ACCIDENT						
DATES		(HEAD-ON, REAR-END, UPSET, ETC.)		FATALITIES	3	INJURIES
LIST ALL TRA WRITE 'NONE'		(ATTACH AND FORFEITURES	SHEET IF MORE S FOR THE PAST TH	PACE IS NEEDED) HREE YEARS (OTHER T	HAN PARK	ING VIOLATIONS) - IF NONE,
LOCATION		DATE	DATE CHAR			PENALTY