



TO: All CDL DRIVERS Before filling out employment application you must pass all:

Qualification of Drivers

YES NO

- | | | | |
|---|--|--|--|
| 1 | Are you in good health? | | |
| 2 | Are you at least 21 years old? | | |
| 3 | Are you able to speak and read English well enough to converse with the general public, understand highway traffic signs and signals.? | | |
| 4 | Are you able to drive a vehicle safely? | | |
| 5 | Are you able to determine whether the vehicle is safely loaded? | | |
| 6 | Do you know how to block, brace and tie down cargo? | | |
| 7 | You only have one valid commercial driver's license? | | |
| 8 | Are you qualified to drive a commercial motor vehicle? | | |
| 9 | Can provide a list of all motor vehicle violations for the past 12 months? | | |

(A disqualified driver must not be allowed to drive a commercial motor vehicle for any reason)

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|----|---|--|--|
| 10 | Are you able to pass a driver's road test? | | |
| 11 | Are you able to test negatively for controlled substances? | | |
| 12 | Are you able to complete an application for employment? | | |
| 13 | You have a current CDL License? | | |
| 14 | You have a current Medical Card? | | |
| 15 | You understand that you must notify employer of any driving violations and/or license suspensions? (before and during employment) | | |

Disqualifying offenses:

- | | | | |
|---|---|--|--|
| 1 | Have you ever been convicted of driving under the influence of alcohol? | | |
| 2 | Have you ever been convicted of illegally using drugs? | | |
| 3 | Have you ever been convicted of driving while illegally possessing or transporting drugs? | | |
| 4 | Have you ever been convicted of leaving the scene of an accident? | | |
| 5 | Have you ever been convicted of using a commercial vehicle while carrying out a serious crime (felony)? | | |

This form must be filled out completely.

You must show proof of current CDL and current Medical Card.

You must be able to test negative for drugs and alcohol(to be considered for employment.

Applicant Signature

Applicant Name Print

Date