

# Driver's Checklist

- Disclosure form
- License
- SSC
- Photo for Badge
- Driver Enrollment form (if CC has True North)
- DOT Medical Card
- Money order/Chargeback
  - Background \$100
  - MVR \$30

# 2<sup>nd</sup> Driver Application

First Name	Middle Name (if any)
Last Name	Social Security #
State Licensed	License #
Phone#	Date of Birth

E-mail Address

## ***APPLICANT CURRENT ADDRESS:***

Street		
City	State	Zip code

## ***PREVIOUS ADDRESSES:***

	Street	City	State	Zip	How long (years)
Previous					
Next Previous					
Next Previous					

**Have you ever been convicted of a Felony?**

Yes

No

*If yes, please explain...*

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**EMPLOYMENT HISTORY**

Employer Name			Date (From Mo/Yr to Mo/Yr)
Address			Position
City	State	Zip	Salary/Wage
Contact Person	Phone		Reason for Leaving

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Address			Position
City	State	Zip	Salary/Wage
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Employer Name			Date (From Mo/Yr to Mo/Yr)
Address			Position
City	State	Zip	Salary/Wage
Contact Person	Phone		Reason for Leaving

### **ACCIDENT RECORD**

*FOR PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED)*

	Date	Nature of Accident <i>(Head on, rear end,...)</i>	Fatalities	Injuries	Hazardous Material Spill
Last Accident					
Next previous					
Next Previous					

**EXPERIENCE AND QUALIFICATIONS – DRIVER**

	<b>State</b>	<b>License No.</b>	<b>Type</b>	<b>Expiration Date</b>
<b>Driver</b>				
<b>Licenses</b>				

**Have you ever been denied a license, permit or privilege to operate a motor vehicle?**

Yes

No

**Has any license, permit, or privilege ever been suspended or revoked?**

Yes

No

**If either answer is Yes, please explain:**

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List states that you've operated in the last 5 years:

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List special courses or training that will help you as a driver:

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## **DRIVING EXPERIENCES**

Class of Equipment (Circle Yes or No)		Circle Type of Equipment	Dates From Mo/Yr to Mo/Yr		Approx. # of Miles (Total)
Straight Truck	Yes - No	Van - Tank - Flat Dump - Refer			
Tractor & Semi-Trailer	Yes - No	Van - Tank - Flat Dump - Refer			
Tractor – Two-Trailers	Yes - No	Van - Tank - Flat Dump - Refer			
Tractor – Three Trailers	Yes - No	Van - Tank - Flat Dump - Refer			
Motor Coach – School Bus (More than 8 passengers)	Yes - No	Van - Tank - Flat Dump - Refer			
Motor Coach – School Bus (More than 15 passengers)	Yes - No	Van - Tank - Flat Dump - Refer			
Other _____					

**PLEASE SIGN:**

*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.*

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY:**

**SPIRIT LOCATION:** \_\_\_\_\_

**NAME OF CONTRACTOR:** \_\_\_\_\_

**ARE WE ADDING A BOND?**       Yes       No

**OTHER NOTES:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REQUESTED BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

# Phase 3

All applicant must go for their *Drug Screen & Physical* **on** or **before** the **4<sup>th</sup> business day**, upon receiving confirmation. If they do not meet this required window they will be disqualified.