

Drivers Application for Employment

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related disability or any other protected group status.

Personal Information

Name			
Address			
Mail Address			
Phone Number	Alt Phone		
Date of Birth			
Social Security Number			
Driver License Number			
For Company Use Only			
Applicant Hired	Rejected		
Date Employed	Hired to Drive in what areas		
Other Notes:			

Employment History

Employers for the last 5 years		
Company		
Address		
City	State	_ Zip
Contact Person	_ Phone Number	
Were Drug Tests Required? Yes	No	
Company Address		
City		
Contact Person		
Were Drug Tests Required? Yes	No	
Company		
Address		

City	State	Zip
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Contact Person_____ Phone Number _____

Were Drug Tests Required? Yes No

Driver Experience Qualifications

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 yes for either give details _____

Accident Record for the past 5 years. Give date and explain each briefly below.

Highest Education Completed _____

List any education or certificates, college, trade, ect that you would like to let us know about below.

List any commercial driving experience you have had in the last 5 years.

Would you be willing and able to perform all of the tasks required by the job for which you are applying, which are as follows

Load and lift luggage or freight which may weigh approximately 50 lbs Yes No

Load and lift luggage or freight which may weigh approximately 100 lbs Yes No

Being on duty up to 15 hours Yes No

Drive up to 10 hours OTR (Over the Road) or local Yes No

Bad weather driving Yes No

Night-time / Over-night Driving Yes No

If you answered "No", you may explain here if you wish:

I have been informed and understand that the information I am providing herein may be used, and my prior employers may be contacted, for the purpose of investigating my safety performance history information as required.

Abbott's Limousine may or may not require a drug test and will pay for said drug test unless you have failed said drug test upon which you are solely responsible for the test fee reimbursement.

I understand that if I have made any misrepresentations on the application or failed to supply required information on this application, the company shall view this as an act of dishonesty and shall be sufficient ground for dismissal anytime.

I certify that I have read and fully understand all parts of this application, and will be given an opportunity to ask questions and have those questions answered to my satisfaction at the time of my interview if called for one.

Your signature on this document 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.

We are an at-will employer and nothing in this application, or any other written document creates a contract for employment.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.

The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

In connection with my application for employment I authorize you to conduct an investigation of all statements contained herein

Print Name _____ Date _____

Applicant's Signature _____

Please fill-out application, download to your machine and fax your application to: 413--243--8247 or Mail to: Abbott's Limousine, 435 Greylock St. Lee MA. 01238