



ARAB CARTAGE & EXPRESS CO.

1769 Old Huntsville Hwy. NW
Arab, Alabama 35016

Phone - 800-423-0478

Local - 256-586-3018

Fax - 256-586-8881

Web - www.arabcartage.com

DRIVER'S APPLICATION FOR EMPLOYMENT

(answer all questions - please print)

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, or non-job related disability.

Position(s) Applied for _____

Date of Application _____

Name _____
last first middle

Social Security No. _____

Address _____
street city
State Zip Phone: _____

Addresses for the past 3 years
street city state & zip code How long? _____
street city state & zip code How long? _____
street city state & zip code How long? _____

Do you have the legal right to work in the United States? _____

Date of birth _____ Can you provide proof of age? _____ Have you worked for this company before? _____

If yes, list the dates employed here and position(s) held. _____

Reason for leaving: _____

Are you employed now? _____ If not, how long since leaving last employment? _____

Who referred you? _____ Rate of pay expected _____

Physical History

List any physical limitations (such as eyesight, limb impairment, diabetes, etc.) _____

Are you physically capable of heavy manual work? _____

Date of last physical examination _____ Doctor's name and address _____

Ever injured on the job? _____ Give nature and degree of such injuries: _____

How much time lost from work in past three years for illness: _____

Have you received workmen's compensation _____ When _____

Employment History

All driver applicants to drive in interstate commerce must provide the following information on all employers during the preceding 3 years. Applicants to drive a commercial motor vehicle* in intrastate or interstate commerce shall also provide an additional 7 years' information on those employers for whom the applicant operated such vehicle.
(Note: List employers in reverse order starting with the most recent. Add another sheet if necessary)

Employer			Dates	
Name			From mo. yr.	To mo. yr.
Address			Position Held	
City	State	Zip	Wage / Salary	
Contact Person		Phone Number	Reason for Leaving	

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Address			Position Held	
City	State	Zip	Wage / Salary	
Contact Person		Phone Number	Reason for Leaving	

Experience and Qualifications - Driver

Driver Licenses Info	State	License No	Type	Expiration Date

Driving Experience

(if none, write "none")

Class of Equipment	Type of Equipment (van, tanker, flat, etc.)	Dates		Approx No. of Miles (Total)
		From	To	
Straight Truck		-		
Tractor Trailer		-		
Doubles or Triples		-		
Motor coach or Bus		-		
Other		-		

List states operated in for last five years: _____

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

List safe driving awards you hold and from whom: _____

Show any trucking, transportation, or other experience that may help in your work for this company: _____

To Be Read and Signed By Applicant

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.

I authorize you to make such investigations and inquiries of my personal, employment, financial, or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.) I hereby release employers, schools, health care providers, and other persons from all liability in responding to inquires and releasing information in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulation of the Company.

(Date)

(Applicants Signature)



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Past Employment Verification

I hereby authorize Arab Cartage & Express to do a complete background investigation, which includes contacting my past employers regarding my services, character, drug and alcohol test results as per Federal Motor Vehicle section 391.23 and 382.413. My past employers are released from any and all liability which may result from furnishing such information. I authorize Arab Cartage & Express to run consumer reports from services. These reports may include information concerning driving record, work experience, motor vehicle reports, and thorough background checks.

Name of Applicant _____

SS# _____

Applicant Signature: _____ Date _____

THIS SECTION TO BE COMPLETED BY PRIOR EMPLOYER

Please fax back to 256-586-8881

Please verify the current/previous employment for the above named person and return your response to Arab Cartage & Express at Fax # 256-586-8881, or email arabcartage@otelco.net

Name of your company: _____

Dates of Employment From _____ To _____

Position Held: _____

Reason for leaving or termination: _____ Comments _____

Is this person eligible for rehire at your company? _____

Was this person dependable and on-time: Yes / No Comments: _____

Type of driving position (circle one) / OTR / Regional / Local / Other _____

Type of equipment operated (circle one) / Van / Reefer / Flatbed / Other _____

Number of accidents _____

Briefly describe each accident

(including: *date, preventative or non-preventative, damage, injuries or fatalities, etc.*)

1) _____

2) _____

3) _____

For the Preceding 36 Months Only:

Has this person ever had an alcohol test with a B.A.C. of 0.04 or greater? Yes / No

Has this person ever tested positive for a controlled substance? Yes / No

Has this person ever reused a required test for drugs or alcohol? Yes / No

This form verified and completed by: _____ Date: _____