



# Absolute Prestige Limousine Service Ltd

1676 13 Road, Loma, CO 81524

970-858-8500

[www.aplimo.com](http://www.aplimo.com)

## Driver's Application for Qualification Pre-Hire for Contract Labor Position

### **INSTRUCTIONS TO THE APPLICANT:**

**Please answer ALL questions. If the answer to any question is "No", do not leave the item blank. Write "NO" or "NONE". This is important!**

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Cell#: \_\_\_\_\_ Emergency Contact#: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Previous Address (If at the above address for less than three years):

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Please provide a copy for each:

- Current Driver's License
- Current DOT Medical Card
- Current MVR (Driving Record)
- Social Security Number/or other Identification for Employment Eligibility Verification (see I-9 Form)

### **Education and Employment History:**

Please circle the highest grade completed:

Grade School: 1 2 3 4 5 6 7 8 9 10 11 12

College: 1 2 3 4

Postgraduate: 1 2 3 4

Driver License: State \_\_\_\_\_ License # \_\_\_\_\_

Endorsements: \_\_\_\_\_  
(passengers, trucks, trailers, etc.)

Driver Experience and Qualifications

\_\_\_\_\_

\_\_\_\_\_

Accident Record for the past three years: attach additional sheet if necessary)

<b>Dates:</b>	<b>Nature of Accident (Head On, Rear End, Upset, etc.)</b>	<b>Fatalities?</b>	<b>Injuries?</b>

Traffic Convictions (other than parking violations) and forfeitures for the past three years (attach additional sheet if necessary):

<b>Location:</b>	<b>Date</b>	<b>Charge</b>	<b>Penalty</b>

- A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?  
 Yes       No
- B. Has any license, permit or privilege ever been suspended, revoked or denied?  
 Yes       No
- C. Have you ever been convicted of a felony?  
 Yes       No

If the answer to either A, B or C is yes, please explain (attach additional sheet if necessary):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT RECORD:**

Please give a **Complete Record** of all employment for the past three years including any unemployment or self-employment, and all commercial driving experience for the past ten (10) years. (Attach additional sheet(s) if more space is needed).

Current / Last Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Worked: \_\_\_\_\_ to \_\_\_\_\_  
(start date) (end date)

Reason for Leaving: \_\_\_\_\_

Were you subject to the FMCSRs\* while employed here?  Yes  No

Was your job designated as a safety-sensitive functions in any DOT-Regulated mode subject to drug and alcohol testing requirements of 49 CFR Part 40?  Yes  No

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Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Worked: \_\_\_\_\_ to \_\_\_\_\_  
(start date) (end date)

Reason for Leaving: \_\_\_\_\_

Were you subject to the FMCSRs\* while employed here?  Yes  No

Was your job designated as a safety-sensitive functions in any DOT-Regulated mode subject to drug and alcohol testing requirements of 49 CFR Part 40?  Yes  No

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Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Worked: \_\_\_\_\_ to \_\_\_\_\_  
(start date) (end date)

Reason for Leaving: \_\_\_\_\_

Were you subject to the FMCSRs\* while employed here?  Yes  No

Was your job designated as a safety-sensitive functions in any DOT-Regulated mode subject to drug and alcohol testing requirements of 49 CFR Part 40?  Yes  No

**PERSONAL REFERENCES:**

List three (3) references other than relatives:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**TO BE READ AND SIGNED BY THE APPLICANT:**

It is agreed and understood that any misrepresentation given above shall be considered an act of dishonesty.

It is agreed and understood that the motor carrier or his agents may investigate the applicant's background to ascertain any and all information of concern to applicant's record and safety performance history, whether same is of record or not, and the applicant releases employers and persons named herein from all liability for any damages on account of his furnishing such information.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an Investigating Consumer Report, including information regarding my character, general reputation, personal characteristics and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my application file.

It is agreed and understood that this *Application for Qualification* in no way obligates the motor carrier to hire and/or employ the applicant.

It is agreed and understood that if qualified and hired, the driver may be on a probationary period during which time he may be disqualified without recourse.

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.

\_\_\_\_\_  
Applicant Signature

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