

DRIVER'S APPLICATION FOR EMPLOYMENT

RIVERSIDE CONTRACTING, INC.
5571 ALLOY SOUTH
MISSOULA, MT 59808
(406) 721-9267

In compliance with Federal and State Equal Employment Opportunity laws, qualified applicants considered for all positions without regard to race, color, religion, sex, national origin, age, marital status or non-job related disability.

Date of Application: _____

Name: _____ Social Security #: _____
Last First Middle

List your addresses of residence for the past 3 years below:

Current Address: _____ Phone: _____
_____ How long? _____

Previous Addresses: _____ How long? _____
_____ How long? _____

Do you have the right to work in the United States? Yes No

Date of Birth: _____ Can you provide proof of age? Yes No
(Required for Commercial Drivers)

Have you worked for this company before? _____ Where? _____
Dates: From _____ To _____ Rate of Pay: _____ Position: _____
Reason for Leaving: _____

Are you currently employed? Yes No How long since leaving last employment? _____

Have you ever been terminated from employment? Yes No

If yes, please explain: _____

Have you ever failed or refused a drug or alcohol test? Yes No

Have you ever been convicted of a misdemeanor or a felony? Yes No

If yes, please explain: _____

Who referred you? _____ Rate of pay expected: _____

Is there any reason you might be unable to perform the functions of the job for which you have applied?

Yes No If yes, please explain: _____

Employment History

All driver applicants to drive in interstate commerce must provide the following information regarding all employers during the preceding 3 years. List complete mailing address, street number, city, state and zip code. 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			DATE	
Name			From	To
Address			Position held	
City	State	Zip	Salary/Wage	
Contact Person	Phone #		Reason for Leaving	
EMPLOYER			DATE	
Name			From	To
Address			Position held	
City	State	Zip	Salary/Wage	
Contact Person	Phone #		Reason for Leaving	
EMPLOYER			DATE	
Name			From	To
Address			Position held	
City	State	Zip	Salary/Wage	
Contact Person	Phone #		Reason for Leaving	
EMPLOYER			DATE	
Name			From	To
Address			Position held	
City	State	Zip	Salary/Wage	
Contact Person	Phone #		Reason for Leaving	
EMPLOYER			DATE	
Name			From	To
Address			Position held	
City	State	Zip	Salary/Wage	
Contact Person	Phone #		Reason for Leaving	
EMPLOYER			DATE	
Name			From	To
Address			Position held	
City	State	Zip	Salary/Wage	
Contact Person	Phone #		Reason for Leaving	

Accident Record for the past 3 years or more (attach sheet if more space is needed). If none, write none.

Dates	Nature of Accident (head-on, rear-end, upset, etc.)	Fatalities	Injuries
Last accident			
Next previous			
Next previous			

Traffic convictions and forfeitures of the past 3 years (other than parking violations). If none, write none.

Location	Date	Charge	Penalty

(Attach sheet if more space is necessary.)

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 High School: 1 2 3 4 College: 1 2 3 4

Last school attended:

(Name)

(City)

Experience And Qualifications - Driver

Driver Licenses	State	License No.	Type	Expiration Date

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No

B. Has your license, permit or privilege ever been suspended or revoked? Yes No

If the answer to either A or B is yes, attach statement giving details.

Driving Experience - If none, write none.

Class of Equipment	Type of Equipment (Van, tank, flat, etc.)	Dates		Approx. number of total miles
		From	To	
Straight Truck				
Tractor and Semi-Trailer				
Tractor - Two Trailers				
Motorcoach-Schoolbus				
Other				

List states operated in for last five years: _____

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

Which safe driving awards do you hold and from whom?

Experience and Qualifications - Other

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

List courses and training other than shown elsewhere in this application:

List special equipment or technical materials you can work with (other than those already shown).

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 inquiries 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(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of Riverside Contracting, Inc.

Signature _____ Date _____