



**PRO INTERMODAL**

## **PRELIMINARY DRIVER APPLICATION**

Applicant Name (*print*): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Social Security Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Ph. Provider: \_\_\_\_\_

CDL-A Number: \_\_\_\_\_ State: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Med. Card Exp: \_\_\_\_\_ TWIC Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

### **Employment History**

<b>Last Employer:</b>	<b>From:</b>	<b>To:</b>
<b>City, State:</b>	<b>Position:</b>	
<b>Phone Number:</b>	<b>Reason for Leaving:</b>	
<b>Previous Employer:</b>	<b>From:</b>	<b>To:</b>
<b>City, State:</b>	<b>Position:</b>	
<b>Phone Number:</b>	<b>Reason for Leaving:</b>	
<b>Previous Employer:</b>	<b>From:</b>	<b>To:</b>
<b>City, State:</b>	<b>Position:</b>	
<b>Phone Number:</b>	<b>Reason for Leaving:</b>	

### **Experience & Qualifications**

*If you answer yes to any of these questions, please provide details. If you need more space, please include a separate sheet:*

Have you ever been denied a license, permit or privilege to operate a motor vehicle?	YES or NO
Has any license, permit, or privilege ever been suspended or revoked?	YES or NO
Have you ever been convicted of a Felony or DUI?	YES or NO
Have you ever tested positive or refused to take a DOT Pre-employment, Random or Post-Accident Alcohol / Drug Test?	YES or NO
How many verifiable years of experience driving a 53' semi-tractor trailer?	_____

### **Consumer Report Release**

I hereby authorize employer to request and evaluate any and all of my background information through a consumer reporting agency, including but not limited to my MVR, PSP, DAC, Criminal and Employment History?

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

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