

Thank you for your interest in Drive Pro University. To apply for a driving position, please complete our online application for employment. Incomplete information will delay the processing of your application or prevent it from being submitted.

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.

To fill out this form, you will need to know the following:

- Social Security Number
- Home address history for the past 3 years
- Current driver license number and driver license history for the past 3 years
- Employment history up to 10 years
- History of traffic accidents, violations and/or convictions from the last 3 years (including DUI or reckless driving conviction and license suspension)
- Military history (if applicable)

Personal Information

First Name *
Middle Name
Last Name *
Suffix
SSN / SIN *
Date of Birth (mm/dd/yyyy) *
Address
Current Street Address (line 1) *
Current Street Address (line 2)
Country *
City *
State/Province *
Zip/Postal Code *

Residence address for 3 or more years? *

	Contact	
If your cell phone is also your p	orimary phone, enter it in both i	fields below.
Primary Phone *		
Cell Phone		
Email Address		
Confirm Email Address*		
Preferred method of contact	ct	
Primary Phone	Cell Phone	Email
Best time to contact you:		
Have you spoken to an Ad	visor? *	
Yes		
No		
Have you filed a Workers 0	Comp Claim in the last 5 ye	ars? *
Yes		
No		

Do you have any physical disabilities or handicaps that would prevent you from passing a DOT physical? *
Yes
No
Have you ever failed a Drug Screen? *
Yes
No
Any current medical restrictions? *
Yes
No
Have you been under a doctor's care in the last 2 years? *
Yes
No
Do you take medication for anything? *
Yes
No
Are you legally eligible for employment in the United States? *
Yes
No
Are you currently employed? *
Yes
No
Do you read, write, and speak English? *
Yes

No
Have you ever been known by any other name? *
Yes
No
How did you hear about us? *
If you answered "Other", "Newspaper" or "Student" to the above question, please enter name:
EDUCATION
List highest grade completed:
PERSONAL REFERENCES
List name, address, city, state, phone number, and relationship:
First Reference:
Second Reference:

Motor Vehicle

License Number *		
Country *		
	Canada	United States
License State/Province		
License Expiration *		
Physical Expiration		
Is this your current driver license? *		
Yes		
No		
Is this a commercial driver license? *		
Yes		
No		
Endorsements		
None		

Other
Tanker
Doubles / Triples
X Endorsement
HazMat
Hazmat expiration date: *
Were you ever in the U.S. Military?
YES
NO
Have you been employed, contracted or attended a company orientation in the last $\underline{3}$ years? *
Yes
No
Have you attended a Driver Training school?
Have you attended a school (not related to truck driving) in the last 3 Years?
YES
NO
Have you been unemployed at any time within the last 3 years?
MUST LIST EMPLOYER INFORMATION
YES
NO
DOT regulations require us to obtain the names and addresses of all your employers/contractors for the past 3 years. For the 7 years preceding that 3 years, we need the name and address of the

employers/contractors where you only attended orientation. For each employer/contractor provided under both these requirements, we must have the dates of employment/contract and the reason for leaving.

1. Has any license, permit or privilege ever been denied, suspended or revoked for any reason? *
Yes
No
2. Have you ever been convicted of driving during license suspension or revocation or driving without a valid license or an expired license, or are any charges pending?
Yes
No
3. Have you ever been convicted for any alcohol or controlled substance related offense while operating a motor vehicle, or are any charges pending? *
Yes
No
4. Have you ever been convicted for possession, sale or transfer of an illegal substance (including but not limited to, marijuana, amphetamines, or derivatives thereof) while on duty, or are any charges pending? *
Yes
No
5. Have you ever been convicted of reckless driving, careless driving or careless operation of a motor vehicle, or are any charges pending? *
Yes

No

6. Have you ever tested positive, or refused to test on a pre-employment drug or alcohol test by an employer to whom you applied, but did not obtain safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules in past three years, or have you ever tested positive or refused to test on any DOT-mandated drug or alcohol test? *

Yes

No

Have you had any moving violations or traffic convictions in the past 7 Years? *

Yes

No

Were you involved in any accidents/incidents with any vehicle in the last 7 years (even if not at fault)?

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 understand the misrepresentation or omission of facts called for is cause for dismissal or denial of entrance. All of the foregoing information is true and correct to the best of my belief and knowledge. I understand that it will be used only for determining the degree to which I may benefit from this training. If any information contained in this application form is false, Georgia Driving Academy, Inc., in its sole discretion may decline to permit the applicant to participate in its free Job Placement Program.

Criminal Background

Have you ever been convicted of a crime? *
Yes
No
Do you have any deferred prosecutions? *
Yes
No
Do you have criminal charges pending? *
Yes
No
Felonies
Have you ever pled "guilty" to, been convicted of, or pled "no contest" to a felony? *

Yes
No
If you have any felony convictions, do you currently hold a minister's permit to enter or exit Canada?*
Yes
No
Misdemeanors
Have you ever pled "guilty" to, been convicted of, had prosecutions deferred in connection with, or pled "no contest" to a misdemeanor? *
Yes
No
Have you ever been incarcerated? *
Yes
No

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 understand the misrepresentation or omission of facts called for is cause for dismissal or denial of entrance. All of the foregoing information is true and correct to the best of my belief and knowledge. I understand that it will be used only for determining the degree to which I may benefit from this training. If any information contained in this application form is false, Georgia Driving Academy, Inc., in its sole discretion may decline to permit the applicant to participate in its free Job Placement Program.

Name

Date

Signtature