SOUTHERN COURIER LLC APPLICATION FOR CONTRACT SERVICES

TO APPLICANT: Complete this document in your own handwriting. Please answer only after carefully reading each question.

SOUTHERN COURIER LLC ASSURES THAT, IN COMPLIANCE WITH U.S. FEDERAL AND STATE EQUAL EMPLOYMENT OPPORTUNITY LAWS, QUALIFIED APPLICANTS ARE CONSIDERED WITHOUT REGARD TO RACE, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, OR DISABILITY.

Name of Applicant	(First)	(Middle)	(Maide	n Name, if	Applicable)	(Last)
Street Address						
City					Zip Code	
Date of Birth		Place of Birth	(6:	4-3		(State)
Home Phone#()		C	`	• .		
Cell Phone Service Provi	der		Phone T	ype:	Android	I-Phone
Social Security#						
Drivers License#						
Emergency Contact						
Phone Number						
Relationship						
Has your driver's license (If yes please give details	s)	ispended or re		YES	NO	
Vehicle Type						
GVWR:			Pipe Rack:	YES	NO	
Do you have a dolly?	YES 1	NO Type:	2Wheel	4Whe	eel	
TWIC Card YES NO						
Endorsements YES N	O (If any, p	lease list)				
Applicant Signature				Date		

List All addresses at which you have resided during the last (4) years Street City State/Zip How Long List all motor vehicle violations of which you have been convicted or fortified bond and/or collateral during the last three (3) years. (Date) (Motor Vehicle Violation) 3._____ List all motor vehicle accidents in which you were involved as a driver in the last three (3) years. Specify the date and nature of each accident and any fatalities or personal injuries it caused. (Nature of Accident) (Fatalities, Injuries? YES or NO) (explain) Education (Name of School) (City) (Graduated?) (Years Completed) (state) High School: College: ______ Tech School: Other:____ Work History Have you worked for a delivery service in the past: (YES) (NO) If yes where? When would you be able to start work?

Previous Employment

Last Employer:		Ph	one:				
Address							
Position Held:			_Start Date:	End date:			
Salary:	May we Contact?	(YES)	(NO)				
Reason for Leaving:							
	(Work His	tory Conti	nued)				
Employer:	Phone:						
Address							
Position Held:			_Start Date:	End date			
Salary:	May we Contact?	(YES)	(NO)				
Reason for Leaving:							
Employer:	Phone:						
Address							
Position Held:			_Start Date:	End date			
Salary:	May we Contact?	(YES)	(NO)				
Reason for Leaving:							
During the past ten (10) y either Driving While Into		victed of,	pled guilty or no				
If yes, please explain:							
Have you ever been charg outcome has been anythin	•		•				
If yes please explain:							

BUSINESS AND PERSONAL REFERENCES

	f three (3) persons no	ot related to you, whom you have l	known at least one (1)
year. (Name)	(Address)	(Telephone)	(Years Acquainted)
1			
	(CERTIFICATION	
information contained information. I understate considered sufficient car whatever reason, I release	in this application, and that any false and use for the denial of ase this company fro all employer. I will also	mployees and/or agents to make and I release from liability all composers or statements made by me in many application. Upon termination mall liability for supplying any ir so submit to a drug screen in accordance.	panies supplying such in this application shall be in of my contract for information concerning my
This certifies that this a in it are true and compl		pleted by me, and that all entries a knowledge.	nd information contained
Signature		Date	
	CRIMINAI	L BACKGROUND CHECK	
valuable customer asse	ts. Therefore, it is the easonable effort to pro-	ry drivers come into contact with ne policy of Southern Courier LLC rotect its clients from any injury, of	to take reasonable
We reserve the right to contractor's tenure with		eackground check prior to and/or o	during an independent
I have read and underst	and the policy stater	ment detailed above.	
Signature			