

# Centennial Warehousing

10400 Hickman Road  
Des Moines, IA 50325  
Phone: 515-278-9517 Fax: 515-278-8280.

Applications are held for 90 days. Applications are considered for position without regard to race, creed, color, sex, religion, age (other than minimum requirements), disability, marital status, or national origin

## Application for Authorization to Drive

*Please print plainly in ink and all blanks must be completed*

Date of Application: \_\_\_\_\_ Home Phone #: ( \_\_\_\_ ) \_\_\_\_\_ Alt. Phone #: ( \_\_\_\_ ) \_\_\_\_\_  
Position Applied for: \_\_\_\_\_ Company Driver

\_\_\_\_\_ Full-time \_\_\_\_\_ Part-time (Specify what days and hours) \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last Previously Used Names

Address: \_\_\_\_\_  
Street City State Zip How Long?

Current Address: \_\_\_\_\_  
Street City State Zip How Long?

List all Previous addresses for past 5 years:

\_\_\_\_\_  
Street City State Zip How Long?

\_\_\_\_\_  
Street City State Zip How Long?

SS#	Drivers License #	State	Class
Date of Birth: ____ / ____ / ____ if you are applying for a job as a commercial truck driver			
In case of an emergency, whom should we contact?			
Name	Phone Number	Relationship	
Name	Phone Number	Relationship	
Have you ever failed or refused a pre-employment drug/alcohol test given by a company where you never accepted employment? Yes No			
Have you worked for this company before? Yes No Dates			
Reason for leaving:			
Do you have any relatives working for this company? Yes No If yes to this answer:			
Name:		Relationship:	

Date

## EMPLOYMENT RECORD FOR THE PAST TEN (10) YEARS

Begin with your present or most recent job and work backwards in order. List your employers for the last 10 years including all full and part time employment. All time must be accounted for including military service, self-employment, and periods of unemployment. Use supplementary sheet if necessary.

### WE MUST HAVE TELEPHONE NUMBERS. INCLUDE ALL PERIODS OF UNEMPLOMENT

**1. Present or Most recent employer- To \_\_\_\_\_ (Month/Year) From \_\_\_\_\_ (Month/Year)**

**Are you currently employed?  yes  no May we contact your current Employer?  yes  no**

Name: \_\_\_\_\_ Supervisor \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Held: \_\_\_\_\_ Rate of Pay \_\_\_\_\_ App total miles driven \_\_\_\_\_

**Driving Experience:**

- All 48
- Midwest
- South
- East
- West
- Northwest
- Mountain

**Equipment Driven**

- Straight Truck
- Tanker
- Dump
- Cabover
- Autohauler
- Flatbed
- Conventional
- Doubles`
- Log Book required
- Reefer
- Van
- Length of Trailer \_\_\_\_\_ FT

Reason for leaving:  Quit  Fired  Lay Off  Other- explain \_\_\_\_\_

Were you subject to the Federal Motor Carrier Safety Regulations while employed by this employer?  yes  no

Was this a safety sensitive function as defined by the DOT subject to alcohol & drug testing?  yes  no

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**2. Second Last Employer- To \_\_\_\_\_ (Month/Year) From \_\_\_\_\_ (Month/Year)**

Name: \_\_\_\_\_ Supervisor \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Held: \_\_\_\_\_ Rate of Pay \_\_\_\_\_ App total miles driven \_\_\_\_\_

**Driving Experience:**

- All 48
- Midwest
- South
- East
- West
- Northwest
- Mountain

**Equipment Driven**

- Straight Truck
- Tanker
- Dump
- Cabover
- Autohauler
- Flatbed
- Conventional
- Doubles`
- Log Book required
- Reefer
- Van
- Length of Trailer \_\_\_\_\_ FT

Reason for leaving:  Quit  Fired  Lay Off  Other- explain \_\_\_\_\_

Were you subject to the Federal Motor Carrier Safety Regulations while employed by this employer?  yes  no

Was this a safety sensitive function as defined by the DOT subject to alcohol & drug testing?  yes  no

**3. Third Last Employer- To\_\_\_\_\_ (Month/Year) From\_\_\_\_\_ (Month/Year)**

Name: \_\_\_\_\_ Supervisor \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Held: \_\_\_\_\_ Rate of Pay \_\_\_\_\_ App total miles driven \_\_\_\_\_

**Driving Experience:**

- All 48
- Midwest
- South
- East
- West
- Northwest
- Mountain

**Equipment Driven**

- Straight Truck
- Tanker
- Dump
- Cabover
- Autohauler
- Flatbed
- Conventional
- Doubles`
- Log Book required
- Reefer
- Van
- Length of Trailer \_\_\_\_\_ FT

Reason for leaving:  Quit  Fired  Lay Off  Other- explain \_\_\_\_\_

Were you subject to the Federal Motor Carrier Safety Regulations while employed by this employer?  yes  no

Was this a safety sensitive function as defined by the DOT subject to alcohol & drug testing?  yes  no

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**4. Fourth Last Employer- To\_\_\_\_\_ (Month/Year) From\_\_\_\_\_ (Month/Year)**

Name: \_\_\_\_\_ Supervisor \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Held: \_\_\_\_\_ Rate of Pay \_\_\_\_\_ App total miles driven \_\_\_\_\_

**Driving Experience:**

- All 48
- Midwest
- South
- East
- West
- Northwest
- Mountain

**Equipment Driven**

- Straight Truck
- Tanker
- Dump
- Cabover
- Autohauler
- Flatbed
- Conventional
- Doubles`
- Log Book required
- Reefer
- Van
- Length of Trailer \_\_\_\_\_ FT

Reason for leaving:  Quit  Fired  Lay Off  Other- explain \_\_\_\_\_

Were you subject to the Federal Motor Carrier Safety Regulations while employed by this employer?  yes  no

Was this a safety sensitive function as defined by the DOT subject to alcohol & drug testing?  yes  no

**5. Fifth Last Employer- To \_\_\_\_\_ (Month/Year) From \_\_\_\_\_ (Month/Year)**

Name: \_\_\_\_\_ Supervisor \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Held: \_\_\_\_\_ Rate of Pay \_\_\_\_\_ App total miles driven \_\_\_\_\_

**Driving Experience:**

**Equipment Driven**

- All 48       West       Straight Truck       Tanker       Dump
- Midwest       Northwest       Cabover       Autohauler       Flatbed
- South       Mountain       Conventional       Doubles`       Log Book required
- East       Reefer       Van      Length of Trailer \_\_\_\_\_ FT

Reason for leaving:  Quit  Fired  Lay Off  Other- explain \_\_\_\_\_

Were you subject to the Federal Motor Carrier Safety Regulations while employed by this employer?  yes  no

Was this a safety sensitive function as defined by the DOT subject to alcohol & drug testing?  yes  no

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**6. Sixth Last Employer- To \_\_\_\_\_ (Month/Year) From \_\_\_\_\_ (Month/Year)**

Name: \_\_\_\_\_ Supervisor \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Held: \_\_\_\_\_ Rate of Pay \_\_\_\_\_ App total miles driven \_\_\_\_\_

**Driving Experience:**

**Equipment Driven**

- All 48       West       Straight Truck       Tanker       Dump
- Midwest       Northwest       Cabover       Autohauler       Flatbed
- South       Mountain       Conventional       Doubles`       Log Book required
- East       Reefer       Van      Length of Trailer \_\_\_\_\_ FT

Reason for leaving:  Quit  Fired  Lay Off  Other- explain \_\_\_\_\_

Were you subject to the Federal Motor Carrier Safety Regulations while employed by this employer?  yes  no

Was this a safety sensitive function as defined by the DOT subject to alcohol & drug testing?  yes  no

**Please answer the following questions with a “YES” OR “NO”**

- Are you a U.S. Citizen or otherwise lawfully authorized to work in this country?  YES  NO
- Have you ever been convicted of a felony?  YES  NO
- If yes, When, date \_\_\_\_\_ A conviction record will not necessarily bar you from employment. Such factor as age and time of offense, seriousness and nature of the violation will be taken into account.
- Is there any reason that you might be unable to perform the functions of the job, for which you have applied, (Truck Driver), I.E. but not limited to lifting, loading, unloading, minor maintenance, tarping and securement of loads, fueling and driving?  YES  NO  
If Yes explain \_\_\_\_\_
- Have you been convicted for driving while intoxicated or driving while under the influence of drugs within the last five years?  YES  NO
- Are you familiar with the Federal Motor Carrier Safety regulations?  YES  NO
- Have you ever been denied a bond?  YES  NO
- Have you ever had your driver’s license suspended or revoked?  YES  NO



**License Information (You must have a valid CDL)                      List all licenses held in the past 5 years**

Issuing State	License Number	Type	Expiration Date	Restrictions	Turned in?

**Driving Record -**

Have you been convicted of any traffic violations in the past 4 years?  YES  NO  
List all traffic violations except for parking tickets the last 4 years. If none, write “NONE”

Month/Year	Violations	Type of Vehicle	Location, City, State	Penalty/Fine	Points Assessed

**Accidents**

Have you been involved in any accidents in the past 4 years?  YES  NO

List all accidents, preventable, non- preventable, regardless of \$\$ amount or fault in the past 4 years. If none, write "NONE"

Month/year	Type of Accident	Type of Vehicle	Location, City, State	\$\$ amount of Damage	Number of Fatalities	Number of Injuries	Were you ticketed	Were you at fault

**Cargo Claims**

Have you had any cargo claims in the past 4 years?  YES  NO

List all claims, preventable, non-preventable, regardless of \$4 amount or fault in the past 4 years. If none write "NONE"

Month/Year	Type of Claim	\$\$ amount of claim	Type of Cargo	Were you charged for the claim?

**Education**

Highest grade completed: High School \_\_\_\_\_ College: \_\_\_\_\_

Check the following that apply:  GED  High School Diploma

**List any Truck Driving Schools you have attended, dates of completion and other safety training**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**Military Status**

Have you served in the United States Armed Forces?  YES  NO

Branch of Service \_\_\_\_\_ dates: From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Reason for leaving: \_\_\_\_\_

Honorable Discharge?  YES  NO

If NO explain: \_\_\_\_\_

Are you currently involved in the National Guard or Reserves?  YES  NO

When are you available to start work for this Company? \_\_\_\_\_



I hereby acknowledge that prior to my submitting this application, I have been informed that the information provided herein may be used to conduct current and previous employer's references or any other individuals this company considers necessary.

I hereby authorize my current and previous employers, references, and any other individuals contacted by this company to release any past or present information requested, including but not limited to past drug and alcohol test results, and I release all providers of said information from any liability stemming from release of same information.

In connection with my application for employment with this Company, I understand that I have the right to review, correct or rebut any information obtained from former employers requested by this Company.

I understand that any false, misleading, or incomplete answers or statements shall be considered sufficient cause for denial or termination of employment and/or authorization to drive.

I understand that nothing contained in this application or in the granting of an interview or a road test is intended to create an employment contract between this Company and myself, for either employment, authorization to drive, or for the providing of any benefits. No promises regarding employment or authorization to drive have been made to me, and no such promises exist unless specifically made by this Company in writing. If an employment relationship is established, I understand that, as an employee at will, I have the right to terminate my employment at any time, and this Company has the same right.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Application Signature

\_\_\_\_\_  
Date