



22027 221ST ST.  
 GLENWOOD, IA 51534  
 P: 712.526.2065  
 F: 712.526.2048  
 LEICKCONSTRUCTION.COM

## DRIVER EMPLOYMENT APPLICATION

COMPLETE IN FULL OR IT WILL NOT BE CONSIDERED.

APPLICANT INFORMATION					
FIRST NAME		MIDDLE NAME		LAST NAME	
PHONE		EMAIL			
DATE OF BIRTH		SOCIAL SECURITY #			
DATE OF APPLICATION		POSITION APPLIED FOR		DATE AVAILABLE FOR WORK	

Do you have legal right to work in the United States?       YES     NO

PREVIOUS THREE YEARS RESIDENCY					
<i>Attach additional sheet if more space is needed</i>					
	STREET	CITY	STATE	ZIP CODE	# OF YEARS AT ADDRESS
CURRENT					
MAILING					
PREVIOUS					
PREVIOUS					
PREVIOUS					

LICENSE INFORMATION				
No person who operates a commercial motor vehicle shall at any time have more than one driver's license (49 CFR 383.21). I certify that I do not have more than one motor vehicle license, the information for which is listed below. Include all licenses held for the past 3 years; attach additional sheets if needed.				
STATE	LICENSE #	TYPE/CLASS	ENDORSEMENTS	EXPIRATION DATE
PREVIOUSLY HELD LICENSES				



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DRIVING EXPERIENCE				
CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.)	DATE FROM	DATE TO	APPROX # OF MILES (TOTAL)
STRAIGHT TRUCK				
TRACTOR & SEMI-TRAILER				
TRACTOR & 2 TRAILERS				
TRACTOR & TANKER				
OTHER				

**ACCIDENT RECORD FOR THE PAST 3 YEARS**

*Attach additional sheet if more space is needed. Check this box if none*

DATES (List most recent first)	NATURE OF ACCIDENT (Head-on, rear-end, upset, etc.)	# FATALITIES	# INJURIES	CHEMICAL SPILLS (Y/N)

**TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)**

*Attach additional sheet if more space is needed. Check this box if none*

DATE CONVICTED (Month/Year)	VIOLATION	STATE OF VIOLATION	PENALTY (Forfeited bond, collateral and/or points)

Have you ever been denied a license, permit, or privilege to operate a motor vehicle?  YES  NO  
 If yes, explain:

Has any license, permit, or privilege ever been suspended or revoked?  YES  NO  
 If yes, explain:

**EMPLOYMENT HISTORY**

The Federal Motor Carrier Safety Regulations (49 CFR 391.21) require that all applicants wishing to drive a commercial vehicle list all employment for the last three (3) years. **In addition, if you have driven a commercial vehicle previously, you must provide employment history for an additional seven (7) years (for a total of ten (10) years). Any gaps in employment in excess of one (1) month must be explained.**

Start with the last or current position, including any military experience, and work backwards (attach separate sheets if necessary). You are required to list the complete mailing address, including street number, city, state, zip; and complete all other information.

CURRENT (MOST RECENT) EMPLOYER					
NAME				PHONE	
ADDRESS					
POSITION HELD		FROM MO/YR		TO MO/YR	
REASON FOR LEAVING				SALARY	
EXPLAIN ANY GAPS IN EMPLOYMENT (Include month/year & reason)					
While employed here, were you subject to the Federal Motor Carrier Safety Regulations?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
Was the job designated as a safety-sensitive function in any Department of Transportation-regulated mode subject to alcohol and controlled substances testing as required by 49 CFR, part 40?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
SECOND (MOST RECENT) EMPLOYER					
NAME				PHONE	
ADDRESS					
POSITION HELD		FROM MO/YR		TO MO/YR	
REASON FOR LEAVING				SALARY	
EXPLAIN ANY GAPS IN EMPLOYMENT (Include month/year & reason)					
While employed here, were you subject to the Federal Motor Carrier Safety Regulations?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
Was the job designated as a safety-sensitive function in any Department of Transportation-regulated mode subject to alcohol and controlled substances testing as required by 49 CFR, part 40?				<input type="checkbox"/> YES	<input type="checkbox"/> NO



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THIRD (MOST RECENT) EMPLOYER					
NAME				PHONE	
ADDRESS					
POSITION HELD		FROM MO/YR		TO MO/YR	
REASON FOR LEAVING				SALARY	
EXPLAIN ANY GAPS IN EMPLOYMENT (Include month/year & reason)					
While employed here, were you subject to the Federal Motor Carrier Safety Regulations?					<input type="checkbox"/> YES <input type="checkbox"/> NO
Was the job designated as a safety-sensitive function in any Department of Transportation-regulated mode subject to alcohol and controlled substances testing as required by 49 CFR, part 40?					<input type="checkbox"/> YES <input type="checkbox"/> NO
FOURTH (MOST RECENT) EMPLOYER					
NAME				PHONE	
ADDRESS					
POSITION HELD		FROM MO/YR		TO MO/YR	
REASON FOR LEAVING				SALARY	
EXPLAIN ANY GAPS IN EMPLOYMENT (Include month/year & reason)					
While employed here, were you subject to the Federal Motor Carrier Safety Regulations?					<input type="checkbox"/> YES <input type="checkbox"/> NO
Was the job designated as a safety-sensitive function in any Department of Transportation-regulated mode subject to alcohol and controlled substances testing as required by 49 CFR, part 40?					<input type="checkbox"/> YES <input type="checkbox"/> NO
FIFTH (MOST RECENT) EMPLOYER					
NAME				PHONE	
ADDRESS					
POSITION HELD		FROM MO/YR		TO MO/YR	
REASON FOR LEAVING				SALARY	
EXPLAIN ANY GAPS IN EMPLOYMENT (Include month/year & reason)					
While employed here, were you subject to the Federal Motor Carrier Safety Regulations?					<input type="checkbox"/> YES <input type="checkbox"/> NO
Was the job designated as a safety-sensitive function in any Department of Transportation-regulated mode subject to alcohol and controlled substances testing as required by 49 CFR, part 40?					<input type="checkbox"/> YES <input type="checkbox"/> NO
ATTACH SEPARATE SHEET, IF NECESSARY					

**EDUCATION**

SCHOOL	NAME & LOCATION	COURSE OF STUDY	YEARS COMPLETED	GRADUATE		DETAILS
				Y	N	
High School				<input type="checkbox"/>	<input type="checkbox"/>	
College				<input type="checkbox"/>	<input type="checkbox"/>	
Other				<input type="checkbox"/>	<input type="checkbox"/>	

**OTHER QUALIFICATIONS**

Please list any other qualifications that you have and which you believe should be considered.



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**TO BE READ AND SIGNED BY APPLICANT**

I authorize you to make investigations (including contacting current and prior employers) into my personal, employment, financial, medical history, and other related matters as may be necessary in arriving at an employment decision. 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 also understand that I am required to abide by all rules and regulations of the Company.

I understand that the information I provide regarding my current and/or prior employers may be used, and those employer(s) will be contacted for the purpose of investigating my safety performance history as required by 49 CFR 391.23. I understand that I have the right to:

- Review information provided by current/prior employers;
- Have errors in the information corrected by previous employers, and for those previous employers to resend the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

This certifies that I completed this application, and that all entries on it and information in it are true and complete to the best of my knowledge. Note: A motor carrier may require an applicant to provide more information than that required by the Federal Motor Carrier Safety Regulations.

Applicant Signature		Date	
Applicant Name (printed)			



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**Disclosure to Applicant/Employee  
Regarding Procurement of A Motor Vehicle Record (MVR)**

In connection with your application/employment, we may procure a MVR on you. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision, we will provide you with a copy of the consumer report and a summary of your rights under the law.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will find these rights summarized on the attached document.

By your signature below, you hereby authorize us to obtain a consumer report about you in order to consider you for employment.

Applicant's/Employee's Name: \_\_\_\_\_  
(Please Print)

Applicant's/Employee's Address: \_\_\_\_\_

City/State/ Zip: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Driver's License State & Number: \_\_\_\_\_

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

**MVR Requirement Policy:**

It is our policy and a requirement of employment, that every employee position:

1. With driving duties as a primary requirement for the position, and/or
2. A Commercial Driver’s License (CDL)

Requires a motor vehicle record (MVR) meeting the grading stated below. This policy applies both to drivers of company owned vehicles, as well as employees using personal vehicles in the course of company business.

MVR's will be examined prior to the start of employment, and at least annually thereafter. Any job offer made to an employee-candidate for a position with driving duties shall be contingent upon an MVR meeting the required standards; continued employment in a position with driving duties, also requires an MVR meeting the standards outlined below.

The standards for motor vehicle records are as follows:

All operators must have possessed a valid driver’s license for at least the last three years.

No new driver will be hired with a "borderline" or "poor" MVR. MVR's will be graded based on the table below, **as minimum requirements**.

Driving records must remain "acceptable" or "clear", as graded on the table below, for continued employment in positions with driving duties.

Any exceptions to these guidelines must be referred to senior management for approval, in writing.

**MOTOR VEHICLE RECORD GRADING CRITERIA: (last 3 years)**

Number of Violations	Number of At-Fault Accidents			
	0	1	2	3
0	Clear	Acceptable	Borderline	<b>Poor</b>
1	Acceptable	Acceptable	Borderline	<b>Poor</b>
2	Acceptable	Borderline	<b>Poor</b>	<b>Poor</b>
3	Borderline	<b>Poor</b>	<b>Poor</b>	<b>Poor</b>
4	<b>Poor</b>	<b>Poor</b>	<b>Poor</b>	<b>Poor</b>



**Definitions:** *Any major violation is a "poor" MVR.*

- **Clear MVR - no points or violations.**
- **Acceptable MVR** - one at-fault accident in last three years and less than two violations, or, zero at-fault accidents and one or two violations.
- **Borderline MVR** - zero at-fault accidents and three violations, or, one at-fault accident and two violations, or, two at-fault accidents in last three years and one violation.
- **Poor MVR** - one or more major violations, or, one at-fault accident and three or more violations, or, two at-fault accidents and two or more violations, or, three or more at-fault accidents in the last three years.
- **At-Fault Accident** - Any accident where the driver is cited with a violation, or negligently contributes to the incident, or any single vehicle accident where the cause is not equipment related.

**Major Violations:**

Driving under the influence of alcohol or drugs.  
Driving while impaired.  
Failure to stop/report an accident.  
Reckless or careless driving.  
Making a false accident report.  
Homicide, manslaughter or assault arising out of the use of a vehicle.  
Driving while license is suspended or revoked.  
Attempting to elude a police officer.

**Minor Violations:** *Any moving violation other than a major, except:*

Motor vehicle equipment, load or size requirement.  
Improper/failure to display license plates (if they exist).  
Failure to sign or display registration.  
Failure to have driver's license in possession (if valid license exists).

**Annual Motor Vehicle Record Screening**

Motor vehicle records (MVR's) shall be requested at least annually, for every employee who has driving duties. The purpose of this investigation is to ensure that all designated drivers who enjoy driving privileges while employed by our company, maintain a "clean" driving record.

**A clean driving record is defined as a driving record that would qualify an applicant for employment (i.e., clear or acceptable).**

If a motor vehicle record is not clear, then we reserve the right to place the employee on probation for a period of time, and/or, revoke driving duties until the employee's motor vehicle record qualifies as clean, and/or terminate the employee if job duties include driving duties. *Upon request by the employee, the employee shall receive a copy of their individual MVR after each MVR review.*