

DRIVER'S APPLICATION FOR EMPLOYMENT

Dear Applicant: Per FMCSR 391.21(d) before an application is submitted, the motor carrier shall inform the applicant that the information he/she provides for the employment history may be used, and the applicant's prior employers may be contacted, for the purpose of investigating the applicant's safety performance history information. The prospective employer must also notify the driver in writing of his/her due process rights as specified in § 391.23(f) regarding information received as a result of these investigations. You the applicant have the following rights: (i) The right to review information provided by previous employers; (ii) The right to have errors in the information corrected by the previous employer and for that previous employer to re-send the corrected information to the prospective employer; (iii) The right to have a rebuttal statement attached to the alleged erroneous information, if the previous employer and driver cannot agree on the accuracy of the information.

Driver Applicant Printed Name _____ Driver Applicant Signature _____ Date _____

Company Name Precision Logisitcs LLC
 Street Address 3518 E Michigan St City, State, Zip Indianapolis, In. 46201

Name _____ Phone () _____

Current Address _____

Street City State Zip

If at the above residence less than 3 years, list below all residences for the past 3 years. Attach a separate sheet if necessary.

Previous Address _____

Street City State Zip

Previous Address _____

Street City State Zip

Date of Birth* / / *Drivers only to complete Date of Birth Social Security # - -

In Case of Emergency Notify: _____ ()
 Name Phone

Contact's Address _____
 Street City State Zip

Position Applying for _____ Rate of pay expected? _____

Temporary Part Time Full Time Who referred you? _____

Have you worked for this company before? Yes No Dates: / / - / /

Rate of Pay? _____ Position _____ Reason for Leaving? _____

Have you worked for this company under another name? Yes No _____

(If job requirement) Have you ever been bonded? Yes No Name of bonding Co. _____

List names of relatives working for this company _____

Are you currently employed? Yes No If not, how long since leaving last employment? _____

EDUCATION

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4

Last school attended _____
 Name Address

List special courses or training that will help you as a driver _____

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EMPLOYMENT RECORD Complete all data for EACH previous employer COMPLETELY. The U.S. Department of Transportation requires that the driver applicants show all employment for the past **three years**. Effective July 1, 1987 they **must also show commercial driver employment for the seven years preceding this three year period**. Sec. 391.21 (b) (10) (11). Account for any gaps in employment between employers.

Name _____ Phone (____) _____

Address _____
Street City State Zip

Position held _____ Dates ____/____/____ - ____/____/____

Type Equip. Driven _____ Were you regulated by FMCSA during this job? Yes No

Areas Driven In _____ Was this job a FMCSA safety sensitive function position subject to DOT regulated controlled substance & alcohol testing? Yes No

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DRIVER EXPERIENCE & QUALIFICATION

LICENSES List all licenses held in the last 3 years.

State	License Number	Type/Endorsement	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____

Do you currently hold more than one valid license? Yes No

Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No

Has any license, permit or privilege ever been suspended or revoked? Yes No

Have you ever been disqualified for violations of the Federal Motor Carrier Safety Reg's? Yes No

If answered Yes to any of the above questions, please give details: _____

EXPERIENCE

Class of Equipment	Type (Van, Tank, Etc.)	From	To
_____	_____	_____	_____
_____	_____	_____	_____

List states operated in during last five years _____

List safe driving awards held & who presented by _____

Accident Review for past 3 years:

Date	City, State	# Fatalities	# Injuries	Nature of Accident (head-on, rear-end, etc.)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Motor Vehicle Laws & Ordinances for the past 3 years other than parking violation:

Location	Date	Charge	Penalty
_____	_____	_____	_____
_____	_____	_____	_____

Applicant: Read and sign before submitting this application

I understand that the information in this application will be used and that prior employers will be contacted for the purpose of investigating my safety performance history information as required by 391.21 (d)&(e). 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.

Signature of Applicant _____

Date _____

OFFICE USE ONLY

Hire Date _____

Employment Denial Date _____

Staff Initials _____



Pre-Employment Urinalysis Notification

The Federal Motor Carrier Safety Regulations, Part 382.301, pre-employment testing requirements apply to driver applicants of our company.

382.301 Pre-Employment testing requirements include the following:

- (a) A motor carrier shall require a driver applicant, who the motor carrier intends to hire, to be tested for the use of controlled substances as a pre-qualification condition.
- (b) A driver applicant shall submit to a controlled substance test as a pre-qualification process.
- (c) Prior to collection of a urine sample under 382.113 of this subpart, a driver applicant shall be notified that the sample will be tested for the presence of controlled substances.

As a condition of my employment, I agree to the urine sample collection and controlled substance testing. I understand a positive test for controlled substances based on the urinalysis test will medically disqualify me from the operation of a commercial motor vehicle for this company. The Medical Review Officer will maintain the results of the urinalysis test. Negative and positive test results will be reported to the company.

My written authorization is required for the urinalysis test results to be given to other parties. I have read and understand the above conditions for the Pre-Employment Urinalysis Notification.

Applicant Name (PRINTED)

Applicant Signature

Date of Signature

Manager Signature

Date of Signature

Fair Credit Reporting Act Disclosure Statement

In accordance with the provisions of Section 604(b)(2)(A) of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter I, of Public Law 104-208), you are being informed that reports verifying your previous employment, previous drug and alcohol test results, and your driving record may be obtained on you for employment purposes. These reports are required by Sections 382.413, 391.23, and 391.25 of the Federal Motor Carrier Safety Regulations.

Applicant's Signature

Date

Print Name

Social Security Number

**IMPORTANT NOTICE
REGARDING BACKGROUND REPORTS
FROM THE PSP Online Service**

In connection with your application for employment with Precision Logistics LLC ("Prospective Employer"), it may obtain one or more reports regarding your driving, and safety inspection history from the Federal Motor Carrier Safety Administration (FMCSA). If the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer will provide you with a copy of the report upon which its decision was based and a written summary of your rights under the Fair Credit Reporting Act before taking any final adverse action. If any final adverse action is taken against you based upon your driving history or safety report, the Prospective Employer will notify you that the action has been taken and that the action was based in part or in whole on this report. The Prospective Employer cannot obtain background reports from FMCSA unless you consent in writing. If you agree that the Prospective Employer may obtain such background reports, please read the following and sign below:

I authorize Precision Logistics LLC ("Prospective Employer") to access the FMCSA Pre-Employment Screening Program (PSP) system to seek information regarding my commercial driving safety record and information regarding my safety inspection history. I understand that I am consenting to the release of safety performance information including crash data from the previous five (5) years and inspection history from the previous three (3) years. I understand and acknowledge that this release of information may assist the Prospective Employer to make a determination regarding my suitability as an employee.

I further understand that neither the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. I understand I may challenge the accuracy of the data by submitting a request to <https://dataqs.fmcsa.dot.gov>. If I am challenging crash or inspection information reported by a State, FMCSA cannot change or correct this data. I understand my request will be forwarded by the DataQs system to the appropriate State for adjudication.

I have read the above Notice Regarding Background Reports provided to me by Prospective Employer and I understand that if I sign this consent form, Prospective Employer may obtain a report of my crash and inspection history. I hereby authorize Prospective Employer and its employees, authorized agents, and/or affiliates to obtain the information authorized above.

Date: _____

Signature

Name (Please Print)

NOTICE: This form is made available to monthly account holders by NICT solely for use as an example of template content. NICT assumes no legal liability or responsibility for the accuracy, completeness or currency of the information disclosed in this example. The intent of the template example is to illustrate for a monthly account holder an example of a driver consent form related to PSP, but all monthly account holders and third party information providers should consult their own legal counsel with respect to the proper format and content of this notice.

REQUEST FOR CHECK OF DRIVING RECORD

I hereby authorize you to release the following information to

Precision Logistics LLC

(Prospective Employer)

for purposes of investigation as required by Sections 391.23 and 391.25 of the Federal Motor Carrier Safety Regulations. You are released from any and all liability which may result from furnishing such information.

(Applicant's Signature)

(Date)

In accordance with the provisions of Sections 604 and 607 of the **Fair Credit Reporting Act**, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter 1 of Public Law 104-208), I hereby certify the following:

1. The consumer (applicant) has authorized in writing the procurement of this report;
2. The consumer (applicant) has been informed in a separate written disclosure that a consumer report may be obtained for employment purposes;
3. The information requested below will be used for a "permissible purpose" (i.e. information for employment purposes) and will be used for no other purpose;
4. The information being obtained will not be used in violation of any federal or state equal opportunity law or regulation; and
5. Before taking an adverse action based in whole or in part on the report the consumer (applicant) will receive a copy of the requested report and the summary of consumer rights as provided with the report by the consumer reporting agency.

I also hereby certify that this report request and the above applicant's release notice meet the definition of "permissible uses" of state motor vehicle records under the provisions of the **Driver's Privacy Protection Act of 1994** (Public Law 103-322, Title XXX, Sections 300002(a)).

(Signature of Requester)

(Date)

TO:

DEAR SIR/MADAM:

The following named person has made application with our company for the position of _____
_____ . In accordance with Section 391.23, Federal Department of Transportation Regulations,
please furnish the undersigned with the applicant's driving record for the past three years.

The following named person is employed with our company in the position of _____
_____ . In accordance with Section 391.25, Federal Department of Transportation Regulations,
please furnish the undersigned with the employee's driving record for the past year.

NAME OF APPLICANT/DRIVER: _____

EMPLOYMENT DATES FROM (m/y) _____ TO (m/y) _____

ADDRESS: _____
(Number & Street) (City) (State) (Zipcode)

FORMER ADDRESS: _____
(Number & Street) (City) (State) (Zipcode)

DATE OF BIRTH: _____ SSN _____ LICENSE NO. _____

REQUESTED BY

(Name of Company)

(Typed Name)

(Address)

(Title)

(City) (State) (Zipcode)

(Signature)

Driver's Rights Pertaining to Release of Drive Information under Regulation 391.23

Motor Carriers have the responsibility to make the following investigations and inquiries with respect to each driver employed other than a person who has been a regularly employed driver of the motor carrier for a continuous period which began before January 1, 1971.

(a)(1) An inquiry into the driver's driving record during the preceding three years to the approximate agency of every State in which the driver held a motor vehicle operator's license or permit during those three years.

(a)(2) An investigation of the driver's employment record during the preceding three years. A copy of the driver's record(s) obtained in response to the inquiry or inquiries to each State drier the driver's employment begins and be retained in compliance with 391.51.

Replies to the investigations of the driver's safety performance history must be placed in the Driver investigation History File within 30 days of the date the driver's employment begins. This goes into effect after October 29, 2004.

Prospective motor carrier must investigate the information from all previous employers of the applicant that employed the driver to operate a CMV within the previous three years. This information must cover general driver identification and employment verification information data elements as specified in 390.15 for accidents involving the driver that occurred in the three year period preceding the date of the employment application and any accidents the previous employer may with to provide.

Prospective motor carrier must investigate the information from all previous DOT regulated employers that employed the driver within the previous three years from the date of the employment application in a safety sensitive function that required alcohol and controlled substance testing specified by 49 CFR Part 40.

Drivers have the following rights:

The right to review information provided by previous employers.

The right to have errors in the information corrected by the previous employer and for that previous employer to re-send the corrected information to the prospective employer.

The right to have a rebuttal statement attached to the alleged erroneous information if the previous employer and the driver cannot agree on the accuracy of the information.

Drivers who wish to review previous employer provided investigative information must submit a written request to the prospective employer when applying or as late as 30 days after employed or being notified of denial of employment. The prospective employer must provide this information to the applicant within five business days of receiving the written request. If the driver has not arranged to pick up or receive the requested record within 0 days of the prospective employer making them available the prospective motor carrier may consider the driver to have waived his/her request to review the records.

Drivers wishing to request correction or erroneous information in records must send the request for the correction to the previous employer that provided the records. After October 20, 2004, the previous employer must either correct and forward the information to the prospective motor carrier employer or notify the driver within 15 days of receiving the driver's request to correct the data that it does not agree to correct the data. Drivers wishing to rebut information in records must send the rebuttal to the previous employer with instruction to include the rebuttal in the driver's Safety Performance History.

I acknowledge that I have read and understand the contents of this document.

Driver's Signature

Date

Driver's Name (Printed)