



A1 ORGANICS

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Ph 970.454.3492 Fax 970.454.3232
www.a1organics.com

COMMERCIAL DRIVER APPLICATION

POSITION(S) APPLIED FOR: _____

Name _____ Social Security Number ____/____/____
Phone _____ Date of Birth _____

CURRENT & PREVIOUS THREE YEARS ADDRESSES OF RESIDENCY:

_____ From _____ To _____
_____ From _____ To _____
_____ From _____ To _____

Have you worked for this company before? Yes No

If yes, give dates: From _____ to _____

Reason for leaving: _____

EDUCATION HISTORY

Please circle the highest grade completed:

Grade School: 1 2 3 4 5 6 7 8 9 10 11 12

College: 1 2 3 4

EMPLOYMENT HISTORY

Give a COMPLETE RECORD of all employment for the past three (3) years, including any unemployment or self employment periods, and all commercial driving experience for the past ten (10) years.

EMPLOYER		
NAME	MO/YR FROM:	MO/YR TO:
ADDRESS	PHONE NUMBER	
CITY	STATE	ZIP
CONTACT PERSON:	FAX NUMBER	
POSITION HELD		
WERE YOU SUBJECT OT THE FMCSRs WHILE EMPLOYED: <input type="checkbox"/> Yes <input type="checkbox"/> No		
WAS YOUR JOB DESIGNATED AS A SAFETY-SENSITIVE FUNCTION IN ANY DOT-REGULATED MODE SUBJECT TO THE DRUG AND ALCOHOL TESTING REQUIREMENTS OF 49 CFR PART 40? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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DRIVING EXPERIENCE (Check Yes or No)

Class of Equipment		From	To	Approximate # of Miles
Straight Truck:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Tractor & Semi-Trailer:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Tractor & Two Trailers:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other :	<input type="checkbox"/> Yes <input type="checkbox"/> No			

List states operated in for the last five (5) years: _____

List special courses/training completed (PTD/DDC, HAZMAT, ETC) _____

List any Safe Driving Awards you hold and from whom: _____

ACCIDENT RECORD FOR PAST THREE (3) YEARS OR MORE (attach sheet if more space is needed)

If none, write "none"

Date of Accident	Nature of Accidents (Head on, rear end, etc)	Location of Accident	# of Fatalities	# of People Injured

TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST THREE (3) YEARS (other than parking violations)

If none, write "none"

Date	Location	Charge	Penalty

DRIVER'S LICENSE (list each driver's license held in the past three (3) years)

State	License #	Class	Endorsement(s)	Expiration Date

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

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

If answer to A or B is yes, give details: _____

Is there any reason you might be unable to perform the functions of the job for which you have applied (as described in the job description)? Yes No

If yes, explain if desired: _____

Have you ever been convicted of a crime? Yes No

If yes, list **EACH** conviction (felony/misdemeanor) separately and **STATE** convicted in.
(Conviction of a crime is not an automatic denial to employment. All circumstances will be considered.)

JOB REFERENCES

List three (3) persons for references, other than family members, who have knowledge of your safety habits.

Name _____	Address _____	Phone _____
Name _____	Address _____	Phone _____
Name _____	Address _____	Phone _____

TO BE READ AND SIGNED BY APPLICANT:

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I understand that if hired by A1 Organics, I am entering into a co-employment relationship with A1 Organics and OnePoint Solutions.

I understand that, as a condition of my consideration for employment with A1 Organics, or as a condition of my continued employment with A1 Organics, that A1 Organics may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, verification through the E-Verify program, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness.

I hereby authorize and consent to A1 Organics and its Agents procurement of such a report. I understand, pursuant to the federal Fair Credit Reporting Act, that A1 Organics will provide me with a copy of any such report if the information contained in such reports, is, in any way, to be used in making a decision regarding my fitness for employment with A1 Organics. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report.

I understand that my employment is at the will of the employer and may be discontinued at any time with or without cause.

Applicant's Signature _____ Date: _____