APPLICATION EXPECTATIONS

EMPLOYMENT

Need to have full and complete work history for the past $\underline{3}$ years listed on the application. Highlighted in yellow is the required information that needs to be filled in before moving to Safety Review.

Employment	
Company Name **	Example Trucking
Start Date*	1 🗸 2021
End Date*	3 🗸 2024
Street Address	
Street Address	
Country*	United States
City State Zip*	Somewhere Alabama 🗸
Telephone	(897)897-8978
Position Held	OTR
Reason for leaving?*	Quit
Were you terminated/discharged/laid off?*	O Yes No (Remove)
Is this your current employer?*	○Yes ● No (Remove)
May we contact this employer at this time?*	● Yes ○ No (Remove)
Did you operate a commercial motor vehicle?	● Yes ○ No (Remove)
Were you subject to the Federal Motor Carrier or Transport Canada Safety Regulations while employed/contracted by this employer/contractor?*	● Yes ○ No (Remove)
Did you perform any safety sensitive functions in this job, regulated by DOT, and subject to drug and alcohol testing?*	●Yes ○No (Remove)
Areas Driven*	OTR
Most common truck driven*	Tractor-Trailer 🗸
Most common trailer*	Van
Trailer length*	53 feet or more 🗸

- Reason for leaving should be listed as one of the following: Current, quit, laid off, terminated, or company out of business.
- Terminations- Need to have a 2 to 3 sentence statement on what happened to review. "Will discuss" is not acceptable.
- Contact information and correct company name are super important. Safety cannot send out the VOE if they do not know what company to reach out to or their phone number.
- Make sure applicant will have enough experience to meet the hiring criteria before moving forward.

<u>NON-DOT employment-</u> Highlighted in yellow is the required information that needs to be filled in before moving to Safety Review.

Employment			
Company Name **	Walmart		
Start Date*	1 🖌 2021		
End Date*	3 🖌 2024		
Street Address			
Street Address			
Country*	United States	~	
City State Zip*	Somewhere	Alabama	~
Telephone	147-741-1474		
Position Held	Non-Driver		
Reason for leaving?*	Quit		
Were you terminated/discharged/laid off?*	○Yes ● No (Remove)		
Is this your current employer?*	O Yes No (Remove)		
May we contact this employer at this time?*	●Yes ○No (Remove)		
Did you operate a commercial motor vehicle?	○Yes ● No (Remove)		
Were you subject to the Federal Motor Carrier or Transport Canada Safety Regulations while employed/contracted by this employer/contractor?*	○Yes ●No (Remove)		
Did you perform any safety sensitive functions in this job, regulated by DOT, and subject to drug and alcohol testing?*	O Yes No (Remove)		
Areas Driven*			
Most common truck driven*	~		
Most common trailer*	`		
Trailer length*	~		

If the applicant stated, they did not operate a commercial vehicle then the following two questions will always be NO.

TRUCKING SCHOOL

DOT requires all trucking employment in the past 10 years to be listed on the application. This includes truck driving schools.

- If you do not see a trucking school listed, ask the applicant where they attended. This goes for MET applicants too.
- > Need to know the school's name, the dates attended, and their contact information.

ACCIDENTS

All accidents in the past $\underline{3}$ years need to be listed on application. Highlighted in yellow is the required information that needs to be filled in before moving to Safety Review.

State						Crim	Action	n
State	Comme	rcial Vehicle	At F	ault	Tickete	bd	Date	7
AL		х					05-2022	
		s/incidents v	vith any v	rehicle	in the la			
it / Incident		Non-	Injury 🗸					
nt / Incident	1	OY	es 🧿 No	(Remo	ve)			
ent / Incide	nt	Rear	End Collisi	ion	~			
towed awa	ay?	OY	es 💿 No	(Remo	ve)			
t / Incident		5	2022	ľ,				
		Some	where					
		Alab	ama		~	1		
ommercial	vehicle?"	O Y		(Remo	ve)			
		OY	es 🧿 No	(Remo	ve)			
ilt?"		OY	es 💿 No	(Remo	ve)			
ed?*		OY	es 💿 No	(Remo	ve)			
er the acci	dent was	behi	nd me fai	led to				
	dent Reco t / Incident ent / Incident ent / Incident t / Incident t / Incident t / Incident a Departme ecordable it?" ed?" tailed infor er the acci	dent Record t / Incident* ht / Incident ent / Incident ent / Incident t / Incident* t / In	dent Record	dent Record t / Incident* Non-Injury ✓ nt / Incident ♀ Yes ● No ent / Incident Rear End Collisi et owed away? ♀ Yes ● No t / Incident* 5 ✓ 2022 Somewhere Alabama ommercial vehicle?* ● Yes ● No a Department of recordable accident?* No a Department of recordable accident?* No a Department of recordable accident?* No Yes ● No a Department of recordable accident?* No Yes ● No a Department of recordable accident?*	dent Record t / Incident* nt / Incident ent / Incident t / Incident* t / Incident	dent Record ht / Incident* Non-Injury ▼ ht / Incident Yes ● No (Remove) ent / Incident Rear End Collision ▼ et towed away? Yes ● No (Remove) t / Incident* 5 ▼ 2022 t / Incident* 5 ▼ 2022 Somewhere Alabama ▼ Alabama ▼ ommercial vehicle?* ● Yes ● No (Remove) a Department of recordable accident?* Yes ● No (Remove) att?* Yes ● No (Remove) ed?* Yes ● No (Remove) tailed information about this er the accident was was coming to a stop at a re behind me failed to slow dow	[+] Add dent Record at / Incident* Non-Injury ▼ at / Incident ♀ Yes ● No (Remove) ent / Incident Rear End Collision ▼ at towed away? ♀ Yes ● No (Remove) at / Incident* 5 ▼ 2022 Somewhere Alabama ▼ ommercial vehicle?* ● Yes ● No (Remove) a Department of recordable accident?* at 2 ● Yes ● No (Remove) a Department of recordable accident?* at 2 ● Yes ● No (Remove) a Department of recordable accident?* at 2 ● Yes ● No (Remove) at 3 ● No (Rem	t/Incident* Non-Injury ▼ ht/Incident Yes ● No (Remove) ent/Incident Rear End Collision ▼ towed away? Yes ● No (Remove) t/Incident* 5 ▼ 2022 towed away? Yes ● No (Remove) t/Incident* 5 ▼ 2022 Somewhere Alabama Alabama ▼ ommercial vehicle?* ● Yes ● No (Remove) a Department of ecordable accident?* ● Yes ● No (Remove) ed?* ● Yes ● No (Remove) ed?* ● Yes ● No (Remove) tailed information about this er the accident was Was coming to a stop at a red light, car behind me failed to slow down and they rear

- Accidents with a citation in the past 3 years are an automatic decline and should not be moved forward.
- A 2 to 3 sentence statement is needed for Safety to review. "Will discuss" or "not my fault" is not acceptable.
- If accident type was fatal, Safety will need the accident report- no matter when the accident occurred.
- Accidents with a citation outside of 3 years but within 5 years must be listed and reviewed by Safety.
- > An accident report may be requested if it was listed as preventable or at fault.

VIOLATIONS

All violations in the past $\underline{3}$ years need to be listed on the application. Use the MVR point system sheet to determine if citation falls within the hiring criteria.

Charge / Description	State	Commercial Vehicle	Fine	Date
Careless	AL			04-2023
Have you had any moving	g violations or	traffic convictions in the		ars?* Add New vio
Traffic Convictions \ V	iolations			
Violation Date*		4 🗙 2023		
Charge / Description:**		Careless	~	
State:*		Alabama	~	
If Speeding, MPH Over Lin	lit	~		
Were you in a Commercial	Vehicle?*	○Yes	ve)	
Penalty / Fine (Check all th	at app <mark>l</mark> y)*		spension mmunity Se	ervice
Fine Amount (if applicable)		~		
Comments If you answered "Other" to please provide additional d		3 points		
				1

Pay attention to if citation was in a personal or commercial vehicle as some points in a CMV vs POV are worth more.

Charge / Description	State	Commercial Vehicle	Fine	Date	-
Careless	AL			04-2023	-

Have you had any moving violations or traffic convictions in the past 3 years?*

No Violations	[+] Add New violatio
Traffic Convictions \ Violations	
Violation Date*	4 🖌 2023
Charge / Description:**	Careless 🗸
State:*	Alabama 🗸
If Speeding, MPH Over Limit:	▼
Were you in a Commercial Vehicle?*	Yes ○ No (Remove)
Penalty / Fine (Check all that apply)*	Fine Suspension Revocation Community Service Other
Fine Amount (if applicable)	~
Comments If you answered "Other" to any question, please provide additional detail:	5 points

FMCSR/MOTOR VEHICLE QUESTIONS

FMCSR

1. Under FMCSR 391.15, are you currently disqualified from driving a commercial motor vehicle? [49 CFR 391.15]*	🔿 Yes 💿 No
2. Has your license, permit, or privilege to drive ever been suspended or revoked for any reason? [49 CFR 391.21(b)(9)]*	⊙Yes ○No
Please provide additional detail, including the dates of the suspension(s)/revoca	tion(s):
01/2016-06/2016- Failure to pay fines	

Suspensions: Need to have the start and end date and reason why the license was suspended.

MCSR	
. Under FMCSR 391.15, are you currently disqualified from driving a ommercial motor vehicle? [49 CFR 391.15]*	🔾 Yes 🧿 No
. Has your license, permit, or privilege to drive ever been suspended or evoked for any reason? [49 CFR 391.21(b)(9)]*	🔾 Yes 🧿 No
. Have you ever been denied a license, permit, or privilege to operate a motor ehicle?[49 CFR 391.21(b)(9)]*	🔾 Yes 🧿 No
. Within the past two years, have you tested positive, or refused to test, on a re-employment drug or alcohol test by an employer to whom you applied, but id not obtain, safety-sensitive transportation work covered by DOT agency rug and alcohol testing rules? [49 CFR 40.25(j)]*	● Yes ○ No
lease provide additional detail about what happened:	
bate of last positive or refusal:	[aou510000
ate of last positive of relasal.	09/15/2022
 bliowing offenses committed during on-duty time [49 C.F.R. 391.15 and 49 C.F.R. 395.2]:" Driving a commercial motor vehicle with a blood alcohol concentration ("BAC") of .04 percent or more Driving under the influence of alcohol, as prescribed by state law Refusal to undergo drug and alcohol testing as required by any 	
 jurisdiction for the enforcement of Federal Motor Carrier Safety Act regulations Driving a commercial motor vehicle under the influence of any 21 C.F.R. 1308.11 Schedule I identified controlled substance, an amphetamine, a narcotic drug, a formulation of an amphetamine, or a derivative of a narcotic drug Transportation, possession, or unlawful use of a 21 C.F.R. 1308.11 Schedule I identified controlled substance, amphetamines, narcotic drugs, formulations of an amphetamine, or derivatives of narcotic drugs while you were on duty driving for a motor carrier Leaving the scene of an accident while operating a commercial motor vehicle Or any other felony involving the use of a commercial motor vehicle 	
 regulations Driving a commercial motor vehicle under the influence of any 21 C.F.R. 1308.11 Schedule I identified controlled substance, an amphetamine, a narcotic drug, a formulation of an amphetamine, or a derivative of a narcotic drug Transportation, possession, or unlawful use of a 21 C.F.R. 1308.11 Schedule I identified controlled substance, amphetamines, narcotic drugs, formulations of an amphetamine, or derivatives of narcotic drugs while you were on duty driving for a motor carrier Leaving the scene of an accident while operating a commercial motor vehicle Or any other felony involving the use of a commercial motor vehicle the three years before the conviction you identified above, had you been onvicted on a separate occasion of either the same offense or one of the other ffenses listed above? [49 C.F.R. 391.15(c)(3)] 	⊖Yes ● No
 regulations Driving a commercial motor vehicle under the influence of any 21 C.F.R. 1308.11 Schedule I identified controlled substance, an amphetamine, a narcotic drug, a formulation of an amphetamine, or a derivative of a narcotic drug Transportation, possession, or unlawful use of a 21 C.F.R. 1308.11 Schedule I identified controlled substance, amphetamines, narcotic drugs, formulations of an amphetamine, or derivatives of narcotic drugs while you were on duty driving for a motor carrier Leaving the scene of an accident while operating a commercial motor vehicle Or any other felony involving the use of a commercial motor vehicle the three years before the conviction you identified above, had you been privicted on a separate occasion of either the same offense or one of the other ffenses listed above? [49 C.F.R. 391.15(c)(3)] 	○ Yes ● No 08/09/2022
 regulations Driving a commercial motor vehicle under the influence of any 21 C.F.R. 1308.11 Schedule I identified controlled substance, an amphetamine, a narcotic drug, a formulation of an amphetamine, or a derivative of a narcotic drug Transportation, possession, or unlawful use of a 21 C.F.R. 1308.11 Schedule I identified controlled substance, amphetamines, narcotic drugs, formulations of an amphetamine, or derivatives of narcotic drugs while you were on duty driving for a motor carrier Leaving the scene of an accident while operating a commercial motor vehicle Or any other felony involving the use of a commercial motor vehicle 	08/09/2022

- > Drug charge/DUI: Auto DQ for any in the last 5 years or 3 or more in a lifetime.
- > Failure/refusal to submit test: Auto DQ for anytime.

MISDEMEANOR/FELONY

Need the have the month, date, and what the applicant was charged with for Safety to review.

Misdemeanors	
Have you ever been convicted of a misdemeanor or have charges pending?*	Yes O No (Remove)
Please describe. Be sure to include s conviction, the fine or sentence, etc.	pecifics, status, misdemeanor type, the date of
05/2015- Petty theft	
	/
Felonies	/

"Will discuss" is not acceptable. Safety needs to know exactly what the applicant was charged with to review.

RELEASES

Need to have current signed releases on file. If the releases are over 30 days old, we cannot run the MVR, CDLIS, or any other reports. Those signatures should be more than a straight line or a dot. The applicant needs to make an attempt at a signature.