

DRIVER'S APPLICATION FOR EMPLOYMENT

Pencco, Inc.

831 Barlett Rd

Sealy, TX 77474

Phone: 979-885-0005 Fax: 979-885-3208

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or handicap.

(answer all questions - please print)

Position(s) Applied for: _____ Date: _____

Name: _____ S.S.#: _____
Last First M.I.

Address: _____
Street City

State Zip Code Phone: _____

Previous Address (3 Years) } How Long? _____

Street City State & Zip

How Long? _____

Street City State & Zip

Do you have the legal right to work in the United States? Yes No

D.O.B: _____ Can you provide proof of age? Yes No
Month Day Year

Have you previously worked for Pencco? Yes No Where? _____

Dates: From: _____ To: _____ Position: _____

Pay Rate: _____ Reason for Leaving: _____

Are you currently employed? Yes No

If not, how long since leaving last employment? _____

How did you hear about this position? _____

Desired Pay: _____

Physical History

Do you have any physical condition or handicap which may limit your ability to perform the job you are applying for? If yes, please explain:

Are you physically capable of heavy manual work? Yes No

Ever Injured on the job? Yes No

Nature and degree of such injuries: _____

How much time lost from work in past 3 years for illness? _____

Are you willing to take a physical examination? Yes No

Employment History

All driver applicants to drive in Interstate commerce must provide the following information on all employers during the prececedent 3 years.

Applicants to drive a commercial motor vehicle* in intrastate or Interstate commerce shall also provide an additional 7 years information on those employers for whom the applicant operated such vehicle.

List employers in reverse order, starting with the most recent. Add another sheet as necessary

EMPLOYER				DATE	
Name				FROM	TO
Address				POSITION HELD	
City	State	ZIP		SALARY/WAGE	
Contact Person		Phone		REASON FOR LEAVING	

EMPLOYER				DATE	
Name				FROM	TO
Address				POSITION HELD	
City	State	ZIP		SALARY/WAGE	
Contact Person		Phone		REASON FOR LEAVING	

EMPLOYER				DATE	
Name				FROM	TO
Address				POSITION HELD	
City	State	ZIP		SALARY/WAGE	
Contact Person		Phone		REASON FOR LEAVING	

EMPLOYER				DATE	
Name				FROM	TO
Address				POSITION HELD	
City	State	ZIP		SALARY/WAGE	
Contact Person		Phone		REASON FOR LEAVING	

EMPLOYER				DATE	
Name				FROM	TO
Address				POSITION HELD	
City	State	ZIP		SALARY/WAGE	
Contact Person		Phone		REASON FOR LEAVING	

EMPLOYER				DATE	
Name				FROM	TO
Address				POSITION HELD	
City	State	ZIP		SALARY/WAGE	
Contact Person		Phone		REASON FOR LEAVING	

* includes vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 15 or more passengers, or any size vehicle to transport hazardous materials in quantity requiring placarding.

ACCIDENT RECORD FOR PAST 3 YEARS OR MORE

List beginning with the most recent (attach additional sheet if necessary)

Dates	Nature of accident (head on, rear-end, upset, etc)	Fatalities	Injuries
1			
2			
3			

TRAFFIC CONVICTIONS AND FORFEITURES (other than parking violations)

Location	Date	Charge	Penalty

EDUCATION

Highest Level of Education Completed: _____

Last School Attended: _____

Name

Location

Experience and Qualifications - Driver

DRIVER LICENSES	State	License #	Type	Expiration Date

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

If you answered yes to any of the above questions, attach statement giving details.

Driver Experience

Class of Equipment	Type of Equipment (Van, Tank, Flat, etc.)	Dates		Approx. # of Miles (Total)
		From	To	
Straight Truck				
Tractor and Semi-Trailer				
Tractor - Two Trailers				
Other				

List All States Operated in for previous 5 years: _____

Have you taken any special courses or training that will help you in this position? If yes, list.

Which safe driving awards do you hold and from whom? _____

**List any trucking, transportation or other experience that may help you in your work
for this company:**

List courses and training (not listed elsewhere on application):

List special equipment or technical materials you have experience working with:
