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Position applied for \_\_\_\_\_

1641 N Ash  
P.O. Box 389  
Russell, KS 67665-0389  
785/483-6492

# JADANSA, Inc.

NAME \_\_\_\_\_  
First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Phone Number \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_

Previous Addresses  
(for past 3 years) \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

(ATTACH SHEET IF MORE SPACE IS NEEDED)

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

Have you worked for this company before? YES or NO When? \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Are you employed now? YES or NO

If not, how long since leaving last employment? \_\_\_\_\_

Have you ever been convicted of a felony? YES or NO If yes, please explain on a separate piece of paper. Conviction of a crime is not an automatic bar to employment--all circumstances will be considered.

Is there any reason you might be unable to perform the functions of the job for which you have applied? YES or NO

If yes, explain if you wish \_\_\_\_\_

(ATTACH SHEET IF MORE SPACE IS NEEDED)

#### EMPLOYMENT HISTORY

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

LIST COMPLETE MAILING ADDRESS, STREET NUMBER, CITY, STATE, AND ZIP.

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 starting with the most recent employer first. List additional employers on a separate sheet including the same information.

LAST EMPLOYER: NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

POSITION HELD \_\_\_\_\_

FROM \_\_\_\_\_

TO \_\_\_\_\_

SALARY \_\_\_\_\_

REASONS FOR LEAVING \_\_\_\_\_

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. YES or NO \_\_\_\_\_

2nd LAST EMPLOYER: NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

POSITION HELD \_\_\_\_\_

FROM \_\_\_\_\_

TO \_\_\_\_\_

SALARY \_\_\_\_\_

REASONS FOR LEAVING \_\_\_\_\_

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. YES or NO \_\_\_\_\_

3rd LAST EMPLOYER: NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

POSITION HELD \_\_\_\_\_

FROM \_\_\_\_\_

TO \_\_\_\_\_

SALARY \_\_\_\_\_

REASONS FOR LEAVING \_\_\_\_\_

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. YES or NO \_\_\_\_\_

4th LAST EMPLOYER: NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

POSITION HELD \_\_\_\_\_

FROM \_\_\_\_\_

TO \_\_\_\_\_

SALARY \_\_\_\_\_

REASONS FOR LEAVING \_\_\_\_\_

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. YES or NO \_\_\_\_\_

Includes vehicles having a GVWR of 26,0001 lbs. or more, vehicles designed to transport 15 or more passengers, or any size vehicle used to transport hazardous materials in a quantity requiring placarding.

The Federal Motor Carrier Safety Regulations apply to anyone operating a motor vehicle on a highway in interstate commerce to transport passengers or property when the vehicle: (1) weighs or has a GVWR of 10,001 pounds or more, (2) is designed to be used to transport 9 or more passengers, or (3) is of any size and is used to transport hazardous materials in quantity requiring placarding.

ACCIDENT RECORD FOR THE PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED), IF NONE WRITE NONE.

| DATE          | NATURE OF ACCIDENT<br>(HEAD-ON, REAR-END, UPSET, ETC.) | FATALITIES | INJURIES | HAZARDOUS<br>MATERIAL SPILL |
|---------------|--|------------|----------|-----------------------------|
| LAST ACCIDENT |  |            |          |                             |
| NEXT PREVIOUS |  |            |          |                             |
| NEXT PREVIOUS |  |            |          |                             |

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

| LOCATION | DATE | CHARGE | PENALTY |
|----------|------|--------|---------|
|          |      |        |         |
|          |      |        |         |
|          |      |        |         |

(ATTACH SHEET IF MORE SPACE IS NEEDED)

#### EXPERIENCE AND QUALIFICATIONS--DRIVER

List all driver licenses or permits held in the past 3 years.

| DRIVER<br>LICENSES | STATE | LICENSE NO. | TYPE | 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 THE ANSWER TO EITHER A OR B IS YES, GIVE DETAILS:

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#### DRIVING EXPERIENCE

| CLASS OF EQUIPMENT       | TYPE OF EQUIPMENT<br>(VAN, TANK, FLAT, ETC.) | DATES |  | APPROX. NO. OF MILES<br>(TOTAL) |
|--------------------------|--|-------|--|---------------------------------|
| FROM                     | TO   |       |  |                                 |
| STRAIGHT TRUCK           |  |       |  |                                 |
| TRACTOR AND SEMI-TRAILER |  |       |  |                                 |
| TRACTOR--TWO TRAILERS    |  |       |  |                                 |
| OTHER                    |  |       |  |                                 |

