

ProDriver Application

Name:	Date:	
Social Security #:	Date of Birth:	
Contact #:	Additional Contact #:	
Drivers License Number:	State:	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Has any license, permit, or privilege ever been revoked or suspended?	Yes	No
If YES, explain:		

Section 383.21 FMCSR states that "No person who operates a commercial motor vehicle shall at any time have more than one driver's license." By completing this portion of the application you are certifying that you have only ONE motor vehicle license.

Prior 3 Years Residency

Current Address:	How Long?
Previous Address:	How Long?
Previous Address:	How Long?

Employment History

Current or Previous Employer Name:		
Address:		
Phone Number:		
Position Held:	From	to
Reason for Leaving:		
Second Previous Employer Name:		
Address:		
Phone Number:		
Position Held:	From	to
Reason for Leaving:		

Third Previous Employer Name:

Address:

Phone Number:

Position Held:

From

to

Reason for Leaving:

With any of your previous employers, were you required to

comply with the Federal Motor Carry Regulations?

Yes

No

Did your previous employer(s) require a drug test?

Yes

No

EDUCATION

Name/Location

Area of Study

Yrs.

Graduate

High School

College

Grad School

EXPERIENCE AND QUALIFICATIONS

DRIVER EXPERIENCE

If you have not had any driving experience in the last 3 years, check here

Motorcoach

Years Experience:

Motorcoach w/ trailer

Years Experience:

Straight Truck

Years Experience:

Truck w/ trailer

Years Experience:

ACCIDENT HISTORY

If you have not had any accidents in the last 3 years, check here...

Accident Date

Nature of Accident

Number of Fatalities

Number of Injuries

VIOLATIONS TRAFFIC

If you have not had any traffic violations in the last 3 years, check here...

Violation Date

Type of Violation

State of Violation

Penalty Received