

Bisson Transportation, Inc.

Company Driver Application

Applicant Information									
Full Name:	ne:			Date:					
	Last	First			M.I.				
Address:									
	Street Address					Apartment/Unit #			
	City				State	ZIP Code			
Phone:		E	mail						
Date Availat	ble:Full-t								
Position Applied for: Rate of Pay Expected:									
YES NO Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.?									
YES NO Have you ever worked for this company?									
		Educa	ation				-		
High School	:								
From:	To:	Did you graduate?	YES	NO	Diploma:				
College:		Address:_							
From:	To:	Did you graduate?	YES	NO	Degree:				
Other:		Address:							
From:	To:	Did you graduate?	YES	NO	Degree:				
References									
Please list t	hree professional referenc	ces.							
Full Name:					Relation	ship:			
Company:					Pr	none:			
Address:									
Full Name:					Relation	ship:			
Company:					Pr	none:			

Address:				
Full Name:			Relationship:	
Company:			Phone:	
Address:				
The U.S. Department of Transp Effective July, 1987, they must year period. §391.21 (B) (10),	portation requires that driver t also show commercial drive	er employment for the sever		
Company:			Phone:	
Address:			Supervisor:	
Job Title:				
Responsibilities:				
From:	_ To:	Reason for Leaving:_		
If currently employed, may we supervisor for a reference?	e contact your current	YES NO		
Company:			Phone:	
Address:			Supervisor:	
Job Title:				
Responsibilities:				
From:	_ To:	Reason for Leaving:_		
Company:			Phone:	
Address:				
Job Title:				
Responsibilities:				
From:	То:			
	Milita	ry Service		
Branch:		From:_		To:
Rank at Discharge:		Type of Discharge:_		

if other than nonorable	e, expiain:									
		F	Required Dri	iver	Informa	tion				
Date of Birth (Month/D	_			1	1					
Social Security Number				1		1				
The U.S. Departmen	quires that dr	iver a	applicants	s state t	heir date of	birth/SS#(§	§391.2	?1(b)(2))		
		Dı	river Licens	se Q	ualificat	tions				
Past three years:										
Licensed State:		License No	umber:				Class:	Exp. Da	te:	
Endorsements:			<u>.</u>							
Licensed State:		License No	umber:				Class:	Exp. Da	te:	
Endorsements:										
If you answer YES to any questions below, please attach a statement with details.										
YES NO Have you ever been denied a license, permit or privilege to operate a motor vehicle?									NO	
Has any license, perm									ŒS □	NO
Have you ever been o	•		·			er Safety	/ Regulations		_ ŒS □	NO
That's you over been s	oquao	a for violation				or Garoty	riogalation			
Ev. Van Tank Flat o	to	7	Driver		enence	Doto	os (To/Erom):	Ann	rovim	oto Miloo:
Ex: Van, Tank, Flat, e	ic.	I	ype of Equipn	ient.		Date	s (To/From):	Арр	NOXIIII	ate Miles:
Straight Truck: Tractor and Semi-Trai	iler									
Twin Trailers – LVC's										
Other:										
List States operated in										
List any special driving List any special driving			ompietea.							
	_	Ac	cident Revi	ew –	- Past 3	Years	_	_		
Accident Dates:	Vehicle		onal or Comme				wn and State	Cita	ation R	eceived?:
								YES		NO
								YES		NO
								YES		NO
Have you had any traffic convictions in the past three years? YES NO										
(not including parking violations)							Ob annua			□ D===!t==
Court: Locati		Location:	Dat	e:			Charge:			Penalty:
Driver Regulations YES NO										
Were you subject to the Federal Motor Carrier Safety Regulations at previous employer?							NO			

Were any of your previous jobs designated as a "safety sensitive function" in any DOT Regulated mode subject to alcohol and drug testing requirements as required by 49 CFR Part 40?	YES	NO					
Have you ever tested positive or refused to test on any pre-employment drug or alcohol tested administered by an employer to which you applied for, but did not obtain, subject to DOT agency drug and alcohol test rules? If YES to above; Did you go to a SAP?	YES PES D	NO					
Disclaimer and Signature							
Bisson is an equal opportunity employer and does not discriminate based on any federal, state or locally protected class.							
This application is not intended and does not create a contract or offer of employment. If hired, employment with the company would be on an at-will basis and could be terminated at the will of either party.							
I certify that my answers are true and complete to the best of my knowledge.							
I understand that false or misleading information in my application or interview may result in rejection or if hired, disciplinary action, up to and including dismissal.							
Signature: Date:							
Fax all applications to: 207-514-1093							